

PATRIARCHAL REPRODUCTION -
AN ANALYSIS OF MALE SOCIAL POWER

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ABSTRACT

The theory of patriarchal reproduction is an attempt to discover the underlying causes of wimmin's oppression. It claims that the system of male privilege is not the product of biological differences between the sexes, or an effect of the capitalist system, but has a real and distinct material infrastructure. This has been found to exist in the material conditions and social process of humin reproduction.

The work of reproducing the humin species takes place within a determinative set of social relations. In this society the dominant social relations are patriarchal, that is, males have social power and control over wimmin's lives. To discover the mechanisms of male domination, the work process of patriarchal reproduction must clearly be distinguished from the social process. The form that this takes is "mothering", while its essence is the subordination of the work of parenting to the power of the non-labourer, the male.

An investigation of the concrete conditions of childbearing and childrearing provide valuable insights into the hidden structures of patriarchy. What wimmin's experiences clearly show is that only a method of analysis capable of separating the social relations of reproduction from all other social relations is able to explain why patriarchy assumes the forms it does. Although the forces which determine the events or moments in people's lives are diverse and complex, if we attempt to account for them all simultaneously we can explain little of the real world.

The social process of reproduction has therefore

been analysed in abstraction from other forces.

Each moment in the social process has been viewed in isolation from the rest: conception, pregnancy, childbirth and childcare. The argument is made that male social power is first of all established on the basis of wimmin's activity in childbearing, even though the real effects of this domination are experienced elsewhere.

CHAPTER ONE

FEMINIST MATERIALISM

1. Introduction

We know from our experience that wimmin are pushed around, put down and pushed aside, but isolating the causes of the oppression is not an easy task.¹ How do we see patriarchy, the system of male domination at work? We see and feel the effects but the underlying causes and structures are never clearly visible. The superior access of men to jobs, wages, productive resources and leisure time; their pre-emptive powers of decision-making, and their use of force; these are the privileges of maleness. So overwhelming and pervasive is the power of maleness that the system of unequal relations between wimmin and men appears to be ingrained in the attitudes, personalities, and attributes of the newborn.

To discover the mechanisms of male power, only certain methods or tools are capable of reaching beyond the everyday observations of people's lives and of grasping the underlying reality. Most methods founder around at the surface, seizing on one thing or another, which are important in themselves but which are manifestations, rather than the causes, of the problem. If we are to fight effectively against male domination we must know the root causes.

The daily routine of wimmin's lives does not appear to be of political interest. Childbearing and childcare

are at the bottom of every agenda if they appear at all.

"What has being a mother got to do with politics?" I was asked this question throughout the interviews I conducted. I intend to show that it has everything to do with politics.

My purpose is to analyse the socio-political implications of human reproduction, on the basis of which I claim male social power is established. My commitments are first, to feminism, and second, to the theory and method of dialectical materialism, to a realist science. The feminist theory I present belongs to the materialist tradition, which is sometimes called 'socialist feminism', or 'marxist feminism'. However many of the insights I have used derive from the theories of radical feminism. It is impossible to name one writer in particular on whose work my analysis of patriarchy is based, but those who have had the greatest influence on me are: Sheila Rowbotham, Shulamith Firestone, Michele Barrett and Zillah Eisenstein.

Since the task of investigating patriarchy is almost limitless I have had to restrict the scope of the enquiry. I am looking only at the antagonistic relations between wimmin and men, even though not all wimmin experience male oppression uniformly. White wimmin profit from racism, middle class wimmin enjoy the privileges which accrue from living in a class system. At times, particularly in the later chapters, I introduce some of the effects of these divisions among wimmin, but this is not my central concern. I am dealing theoretically with only two groups or 'classes' of people: female and male.

As a feminist my primary commitment is to wimmin who parent. The marginalization of wimmin childcarers, not only

in the wider social structure but within the wimmin's movement itself, has made me re-examine my understanding of power. I discovered that wimmin with children, particularly young children, are as disadvantaged from participating in the life of the wimmin's movement, as they are in any other organization. It has taken me a long time to realize that in essence this is not the fault of the movement, or of attitudes within the movement, but of the organization of patriarchal society.

When I decided that developing the theory necessitated going out and interviewing wimmin, I immediately confronted a doubt: was I the 'right' person to do it? I felt that as a woman who is not dealing with the 24 hour reality of childcare, I had no credentials for the work. At the same time I felt the political urgency of addressing the gulf between wimmin who parent and those who do not. Eventually I overcame this doubt.

The most important realization was that wimmin with pre-schoolers, those I wanted to interview, are the people with the least time and energy to put into an indepth scientific examination of their lives and work. They are too busy living through it. But the fact that I have never given birth and that I have not worked in childcare does not prevent me from hearing the experiences of those who have. Within the theory itself I found confirmation through the understanding that parenting in a patriarchal society is not about biology or emotional investment, but power. The work wimmin do as childbearers and as childcarers is the most fundamental political aspect of wimmin's oppression.

In the following discussion of dialectical materialism, I introduce the central theoretical propositions of the

materialist view of patriarchal reproduction.

2. Dialectical Materialism and the Feminist Agenda

Dialectical materialism was principally developed by Karl Marx and Frederick Engels, but an entire industry of writers emerged in their wake, dedicated to the expansion, advance and revision of the theory. Marx did not foresee the day when dialectical materialism would be rigorously applied to the antagonistic relations between women and men, but there is nothing in the method itself that restricts its application to modes of production.

Although Marx and Engels regarded the most fundamental factor in human existence to be the 'mode of production' of the means of subsistence, the marxist concept of materialism acknowledges that there are two determining factors in history.

...[On]the one hand, the production of the means of existence, of food, clothing, shelter and the tools necessary for that production: on the other side, the production of human beings themselves, the propagation of the species.²

Despite the recognition that both production and reproduction fundamentally determine human existence, the latter has been viewed by marxists as an effect purely of the former. Marx regarded the organization of production in response to basic human needs as the determining infrastructure of society.

Feminist materialism is in keeping with the general materialist propositions of the early marxists. However, the reproduction of human beings is not merely an effect of the mode of production, but is a distinct mechanism of its own - the mode of reproduction - which I shall argue is the most fundamental of all social mechanisms.

Marx claimed that production is essentially a social relation between people, not that production causes, but that it entails social relations, known as the 'social relations of production'. Phillip Corrigan summarizes the marxist view of production as a social relation.

*Production means making things. Things are not made in abstraction, they are fashioned and fabricated in definite, concrete ways and those ways entail particular relations among the people who are engaged in that production or in making it possible for others to engage directly. These relations and, one aspect of them, ideas about the relationships, are produced and reproduced along with the products themselves.*³

Corrigan's explanation of the social relations of production can refer to the context of human reproduction. Human beings are never reproduced in abstraction, but always in definite concrete ways which entail particular social relations among women and men. Ideas about the relationships involved are produced along with the material work of reproducing the species. Just as the notion of production by an isolated individual is 'absurd', so too is reproduction by an isolated individual.⁴

Dialectical materialism claims that concrete conditions of production and the forms taken by social relations are never fixed and unchanging, but are subject to social and political change over time. This is fundamental to dialectical materialism, and it applies equally to the material conditions and social context in which conception, pregnancy, birth, and childcare take place. That this does not appear to be the case is reinforced by a set of ideas that attempt to sever the practices of human reproduction from the social relations they entail. This ideology conceals the social basis of reproduction by naturalising the social relationships.

I examine the ideology of naturalism in detail in the second chapter.

The view of ideology I am using is that developed by Marx and Engels in The German Ideology: "The ruling ideas are the ideal expression of the dominant material relations".⁵ The ideas, beliefs and theories that prevail in a given society express the power relations and the ruling apparatus. The class that has control of the means of material production also predominates over the means of abstract production.

Ideology is not based on 'trickery' or deception. The success of a particular ideology is precisely its apparent justification of a social phenomenon because it corresponds to the forms of empirical social reality which people experience and perceive.⁶ For Marx, experience itself is the principle means of ideological production.

The ruling ideas in male dominated society justify the power relations between female and male. The dominant material relations of reproduction in patriarchy are the basis for a set of ideologies that villify, trivialise and objectify wimmin, and this set of ideas is produced by the concrete experiences of wimmin and men. However, ideologies never explain people's experiences.

Ideology is thus chiefly concerned with the level of appearances. One of the most important contributions Marx made was articulating the distinction between the manifest level of appearances and the hidden, or underlying mechanisms which are responsible for a social phenomenon taking a particular form.⁷ In marxist language the distinction between appearance and reality is called 'form' and 'essence'.

Particular relations are deemed 'essential' in so far as they are held to constitute the conditions or the grounds for the existence of a specific social form under investigation. The distinction between essence and form is just as vital to feminist theory and practice as it is to marxist study, because we are struggling to discover the real infrastructure of patriarchal reproduction. The social form that dominates wimmin's lives in this society is "mothering", the essence is the work of socially necessary parenting and its corresponding social relations. Mothering is the form taken by the social relations of male domination and female subordination. It is a socially constructed role that results from the political strength of males and the political weakness of females.

One of the theoretical advances that was necessary for the development of a materialist analysis of patriarchy was the ability to differentiate between sex and gender. 'Sex' refers to the biological category of wimmin and men and 'gender' refers to the socio-political construction of female and male. Gayle Rubin comments on the transformation of biological sex into social gender.

*What is a domesticated woman? A female of the species. The one explanation is as good as the other. A woman is a woman. She only becomes a domestic, a wife, a chattel, a playboy bunny, a prostitute, or a human dictaphone in certain relations. Torn from these relationships, she is no more the helpmeet of man than gold in itself is money . . . etc. What then are these relationships by which a female becomes an oppressed woman?*⁸

Rubin defines a 'sex-gender system' as a "set of arrangements by which the biological raw material of human sex and procreation is shaped by human social intervention, and satisfied in a conventional manner..."⁹ Just as Marx

distinguished the social context in which human production occurs, feminist materialism identifies a set of social relations of reproduction. The labour process, comprising conception, gestation, birth and childcare, is always subordinated to the dominant social relations.

The purpose of this enquiry is to establish the existence of a real infrastructure, apart from that of social production. Separating the two at a theoretical level is difficult, because in the real world they exist together. Often the effects of one infrastructure appear as the effects of the other. An example of the relatedness of patriarchal and capitalist forms is the medical institution.

When a woman goes to a doctor she is confronted with the power of maleness. The teaching, methods, and diagnostic presuppositions embody the material relations of patriarchal society, of female submission and male authority, irrespective of the sex of the practitioner. However, the overriding social form that this takes is not so much gender relations as the power involved in the bourgeois relationship between professional/expert and patient.

The control exercised over medical knowledge and technology by the expert is both patriarchal and capitalist in essence, but the most visible social form is capitalist medicine. A woman can avoid the paternalism of the doctor and the powerlessness of the patient role if she turns to alternative forms of health care, but the medical institution's monopoly on technology, research, and capital forces her back into the surgery waiting room if she requires urgent medical attention.

The social relations of gender and of production are manifested in obscure and confusing ways which makes it

difficult to distinguish the origins of and interconnections among, the predominating social forces. How we learn about the world and make this type of distinction requires a realist theory of knowledge.

3. Realist Epistemology

The most fundamental tenet of scientific realism is the ontological belief in the existence of a real world, independent of our knowing about it.¹⁰ The material world is viewed, not as a construct of our minds, our theories or imagination, but as an independently existing reality.

The materialist or realist account of the world calls for a particular theory of knowledge, one that can deal with the distinction between form and essence. However, the epistemological view that dominates social science implicitly denies the distinction between empirically given social phenomena and a hidden level of reality. Peter Winch voices an explicit belief in the idealist basis of empiricism.

*The actual social relations between men and the ideas which men's actions embody are really the same thing from different points of view.*¹¹

Empiricist epistemology teaches the method of reading the world at the level of appearances.

Observation provides a maximally certain and conceptually unrevisable foundation of empirical knowledge, a foundation that supplies the basic premises of all our reasoning and without which¹² there would not even be any probable knowledge.

Since to the crude empiricist there is no distinction between real relations and empirical phenomena, the process of learning about the world is unproblematic, even simplistic. The social form and content (or essence) are collapsed into one, and knowledge is obtained by observing empirical

regularities, or regular conjunctions of events which are assembled as 'laws'.¹³

Realist epistemology ventures further than a direct reading of the empirical world and attempts to account for the existence of particular social forms through a process of hypothesis formation. The analytic method involves going beyond what is manifestly evident in society, unearthing the mechanisms through which empirical phenomena are brought about and probing behind them, to discover the conditions of their existence. The method required for this type of investigation is called "retroductive logic".¹⁴

Retroduction is a logic of hypothesis formation in which mechanisms and conditions are hypothesised which would, if they existed, explain how and why the phenomena observed come to assume the forms they do. The method is anti-empiricist but it is grounded firmly in the investigation of empirical conditions. The most thorough example we have of this method is Marx's investigation of the capitalist mode of production.

Marx recognised that the level of appearances can be misleading and that empirical correlations can be spurious. In order to account for the phenomenon of the capitalist wage system, Marx used the retroductive method of hypothesis formation. The most important contribution he made to social theory was the analysis of capital as a social relation. He explained the real relations underlying the capitalist wage system. I briefly summarize Marx's discovery.

Capitalism is grounded in the accumulation of capital which occurs through the extraction of surplus value from wage labourers. Workers do not sell products to capitalists,

they sell their labour power, their capacity to labour for a certain amount of time, in return for a wage. There is no immediate proof that the source of the capitalist's profit is workers' unpaid labour.

Wages are set, not according to the value of the goods workers produce but according to the costs of maintaining and regenerating the workers' food, clothing and shelter. These costs determine the value of labour power, and they are the product of historical conditions and political struggle.

Surplus value is the difference between the value of labour power (what the capitalist pays out in wages) and the value which workers add to the goods produced. Surplus value is realized when the capitalist exchanges goods on the market. This process can be seen more clearly in a theoretical model.

$$M - C \begin{matrix} (LP) \\ (MP) \end{matrix} - P - C' - M'$$

The circuit demonstrates how money (M), is used to purchase commodities used in the production process (means of production MP, and labour power LP), in order to set them to work (P), producing commodity capital (C'), which can be sold for money capital (M') and yields a profit (M'-M).

Using retrodution, Marx was able to arrive at the crucial distinction between the value of labour power and value labour power can create, and by doing so he managed to isolate the real source of capitalist profit which does not present itself for direct observation. Marx found that the selling of labour power as a commodity is the real relation and that wages is the phenomenal form taken by that relation.

Retroduction is part of the methodology required by feminist materialism. The empiricist view of knowledge and method does not present an option for the study of patriarchy, but is part of the problem. On the empiricist account of the world wimmin disappear, their lack of presence in the 'public' political world is either unremarked or taken as evidence that wimmin are content. The social form of patriarchal society is taken as its reality. Scientific realism is necessary for feminist praxis since it provides some of the tools for analysing the social forms that dominate wimmin's lives and for working out the real relations responsible for the relative invisibility and silence of wimmin. As I have attempted to apply the marxist method of abstraction in my study of gender relations, I explain what is involved in that method.

4. The Marxist Method of Abstraction

Retroductive logic takes as its departure point concrete social forms, not abstract categories. However the method of inquiry is different from the method of presentation. After the empirical study has been completed and the method of abstraction applied, the material is presented in an ascending order from the most abstract relations, reduced to their simplest forms, to the diverse concrete forms in which they are manifested.¹⁵ The categories presented are not a priori constructs, but are drawn from real conditions.

The method of presentation at first glance reverses the order of significance, for while I claim that the overwhelming experience of powerlessness belongs to the stage

of childcare, I begin, not with childcare, but with the social relations established at pregnancy. The visible sequential ordering of the labour process (conception, gestation, birth and childcare) does not appear in the presentation. The real ordering, which presentation of the argument requires, bears no necessary relation to observed temporal sequence. Instead it is organized according to a particular hypothesis about the relative strengths of the causal mechanisms relating to various stages in the social process of reproduction. According to the hypothesized determining effects of each stage, the order I present is: gestation, conception, birth and childcare.

There are two major requirements in this method of hypothesis formation.¹⁶ The propositions must be consistent, that is, they must not contradict one another, and they must be exhaustive accounts (as far as possible) of the forms under analysis.

The unique feature of this method is the distinctive ordering of the mechanisms obtained by the method of abstraction. The mechanisms are ordered according to the relative strengths of the forces they are hypothesised to generate.¹⁷ This enables us not only to arrive at a set of mechanisms but to work out the manner in which they are connected and so played out in people's lives.

Each mechanism generates a social force but, they are not of equal strength since some are more powerful and predominate over others. The stronger mechanisms do not determine the detailed functioning of the weaker mechanisms. Rather the particular essence of each force is determined by its own particular contradiction. However, the stronger

mechanism establishes limits within which the weaker mechanisms operate. For example, despite the fact that patriarchal control of wimmin's fertility sets limits on the development of reproductive technology, the capitalist monopoly on research development is a stronger mechanism in determining the detailed directions of medical research.

The empiricist method of assembling a set of variables that are correlated for significance tells us nothing of the real order of significance in the construction of a particular phenomenon, because it ignores the hidden level of reality. The data can only generate information contained within the set of variables. It cannot detect the presence of hidden variables or structures, whose existence is ruled out by definition.

As I previously stated, concrete conditions and social relations are never fixed but are subject to constant change. An understanding of dialectics, of the internal contradictions within each mechanism, is essential for explaining and accounting for change. The dynamic of change resides in the contradictions contained within and produced by each mechanism.

*Contradictoriness within each thing is the fundamental cause of its development, while its interrelations and interactions with other things are secondary causes.*¹⁸

Each mechanism produces opposing forces which Mao called the 'principal aspect', and the 'secondary aspect', the former predominating over the latter. In any given contradiction the development of the contradictory aspects is uneven. It is important to stress that the relationship is reciprocal, involving two-way causality.¹⁹ Under capitalist patriarchy males have greater social power than females, but wimmin are not wholly subordinate to men. Historically wimmin have

always developed methods for resisting and combatting male domination on both an individual and a society wide level. Dialectical materialism posits the interrelationship of all phenomena but it would explain nothing if all relations were assumed, to be equal. If this was the case in the real world, change would come to a halt.

The essence of dialectics is discovering the internal and necessary relations of a phenomenon, internal in the sense that each part of the relation depends upon its relation to the other. It is easy to mistake an external, contingent relation for a necessary one. For example, the fight for control over fertility has characterized the movement against patriarchy. This is an essential part of the struggle. However, until patriarchy is overthrown the capacity to decide if and when to conceive will not fundamentally alter the antagonistic relation. The division of childcare work in which women are most disadvantaged will be unchanged, because the mechanisms responsible are determined elsewhere, not by the specific mechanism of fertility control.

Change is chiefly due to the development of the internal relation or contradiction, but this does not exclude the operation of external causes or relations. Mao comments:

*...materialist dialectics...holds that external causes are the conditions of change and internal causes are the basis of change, and that external causes become operative through internal causes.*²⁰

The campaigns which are mounted for access to birth control and safe abortion are not only vital to the individual woman who benefit from changes to the law. They build consciousness about a whole range of situations which affect women's lives, and they broaden the possibilities for change.

Using the method of abstraction the more fundamental mechanisms are separated out from the less fundamental ones.

The first mechanism is always analysed in abstraction (temporarily ignoring) the rest, and it is always the one hypothesised to be the most fundamental, the one that generates the strongest tendential forces. Lesser mechanisms are then gradually introduced and the result is the reconstruction of the whole, of the most complex mechanism.

The method of abstraction is a movement from the highest level of abstraction to the most concrete level, from the 'simple and abstract' to the 'complex and concrete'.²¹ The clearest and most exhaustive example is Marx's analysis of capitalist production.

Marx identified the capitalist mode of production as the most fundamental mechanism. He began with production (in the simplest form of the commodity), and he analysed it in abstraction from exchange and distribution. The tendential laws he derived from the 'moment' of production set the limits within which the weaker mechanisms of exchange and distribution operate. These 'laws' are not the same as those understood by empiricists, of well corroborated, universal, empirical regularities in patterns of events. They are statements about mechanisms.

*The citation of a law presupposes a claim about the activity of some mechanism but not about the conditions under which the mechanism operates and hence not about the results of its activities, i.e. the actual outcome on any particular occasion.*²²

The effects produced by a particular mechanism at the empirical level depend upon contingently related conditions, including those produced by other mechanisms. We cannot deduce the form a social relation will take or the manifestations of a mechanism by theorizing. Empirical research is essential to discover the form and outcome of a mechanism.

It is important to stress that empirical study is not the same thing as empiricism. Andrew Sayer has commented that the fear of tainting empirical study with empiricism has contributed to a neglect of concrete investigation and a withdrawal into theory in marxist research.²³ Sayer's comment could be applied to feminist materialist work, and this is one of the problems I hope to address.

The concepts 'empirical' and 'concrete' are not synonymous, as Sayer explains.²⁴ To illustrate the distinction, consider an abortion clinic. According to Sayer an object is concrete not simply because it exists, but because it is the combination of many diverse forces or processes. To make an abortion clinic concrete we have to specify all the relationships in which it is involved: with the woman attending, their families, friends, and bosses, with the consulting surgeon, with the nursing staff, the medical institution, the laws, with the state agencies involved, with the anti-choice lobby, etc. These diverse determinations are not simply 'added up', or 'read off' at an empirical level, they are synthesised and "their combination qualitatively modifies each constituent element."

The concrete, as a unity of diverse determinations is a combination of several necessary relationships, but the form of the combination is contingent and therefore only determinable through empirical research. Empirical research into the conditions of patriarchal reproduction is necessary for theoretical investigation, but it is insufficient on its own. It must be formulated into a concrete analysis.

When I introduce the interviewing method I have used I will show how the method of abstraction can be applied in

concrete terms, particularly the difficulties involved.

But first I examine some of the major theoretical approaches which have been developed using the dialectical materialist method and theory.

5. The Development of Feminist Materialist Theory

The principle aim of feminists working in this tradition has been to locate and articulate a patriarchal infrastructure. The theorists I focus on have all made vital contributions to this goal. The problems and omissions in the overall theoretical schema provide the departure point for my investigation.

(1) Shulamith Firestone

The most significant milestone in the development of feminist materialism was the publishing of The Dialectic of Sex - The Case For Feminist Revolution, by Shulamith Firestone. In this profoundly radical book, Firestone attempts to appropriate the materialist tools of analysis devised by Marx and Engels and apply them to the reproduction of human beings.

Firestone argues that the determining factor in history is not the mode of production, as the marxists had assumed, but the mode of reproducing the human species. She locates the "great moving power of all historical events in the dialectic of sex."²⁵ The first division of labour was biological sex differences, and Firestone argues that this was the basis for the division of labour which later emerged as the class system, "furnishing the paradigm of caste (discrimination based on biological characteristics)."²⁶

For Firestone, the reproductive infrastructure is the 'basic reproductive unit' or the biological family of male/female/infant.

According to Firestone wimmin's unique physiology-"menstruation, menopause, and 'female ills', constant painful childbirth, wetnursing and care of infants", is the material basis of wimmin's dependency on males.²⁷ She sees the long years of infant dependency on humin care as involving a "basic mother/child interdependency", which she claims, shapes the consciousness of all wimmin and children.

Firestone's theory is problematic in at least two important respects. Her concept of the 'biological family' is a transhistorical category that is invalid. There is no universal family type organization. Families are just one of the social forms taken by gender relations, and it has shown enormous social and historical variation.

The most significant problem in Firestone's theory is her assumption of mother/infant interdependency. The concrete relationships between wimmin and children are not biologically determined, but result from a particular social relationship. It is sometimes argued that the biological needs of children for care dictate the dependency of wimmin on men. However children's childcare requirements have no social implication for the concrete organization of the division of childcare labour. Firestone's assumption of an innate interdependency results from her failure to differentiate between the labour process of reproduction and the social relations to which it is subordinated. She has confused the form of childcare labour under patriarchy for the real relations. By collapsing the

social relations into the labour process, Firestone has passed over the political distinction between 'sex' and 'gender'.

Inevitably Firestone's reduction of the reproductive social relations to a type of biological determinism leads her to the logical conclusion that the only route to revolutionary change is to seize control of reproductive technology and to free wimmin from the constraints of their biology. The goal of feminist revolution is not just to eliminate male privilege, but to eliminate the sex distinction itself.²⁸ The reproduction of the species would be accomplished largely by artificial reproduction. Children would be born of both sexes, or independently of either. "The tyranny of the biological family would be broken."²⁹

Firestone's vision is appealing, and the technology required to an extent already existent. However, while developments in reproductive technology have immense potential for the growing consciousness of the political connection between child bearing and childrearing, it is the social relations embodied in the technology itself that is the crucial determinant. Firestone recognizes that a fierce struggle must occur before wimmin can seize control of the forces of reproduction, but technology can only be used in wimmin's social interest after male domination has been overthrown. The social relations dominate over the use and development of technology.

Firestone's theory marks a watershed in the development of feminist materialism. Her work is materialist and dialectical, but it falls down through her failure to ground the theory in social and historical conditions. Her theory

was crudely materialist and contained strong elements of biological determinism. Firestone firmly established the direction for feminist materialists by identifying a real material infrastructure in reproduction.

(2) Juliet Mitchell

Juliet Mitchell's work is useful to examine because it demonstrates one of the major directions taken by feminists attempting to remain within the materialist tradition and simultaneously to account for patriarchy. But Mitchell does not liberate herself from the constraints of marxist orthodoxy, since for her the key structures in wimmin's situations, understood by her as production, reproduction, sexuality and the socialization of children, are "ultimately, but only ultimately...determined by the economic factor".³⁰

Mitchell recognizes that wimmin's lives form a 'complex unity' and that dominating social structures shift and change over time. However, her view of patriarchy is idealist. For her reproduction limits wimmin only insofar as patriarchal ideology defines it as limiting.³¹ The direction Mitchell took to arrive at this position was her concern to explain how gender relations are socially constructed, rather than asking what were the material conditions which gave rise to a particular set of social relations. She turned to Freudian psychoanalysis and found there the categories of 'masculinity' and 'femininity', which became central to her theory of patriarchy.³² As Michele Barrett comments, Mitchell's reading of Freud was "unduly charitable".³³

In her re-interpretation of Freud, Mitchell argues that Freud was not describing a real world but the mental

representation of social reality. The construction of masculinity, femininity and sexuality takes place at the level of ideology. The result was the formulation of a theory of patriarchy as an ideological construction.

At the time of Mitchell's writing many feminists were dissatisfied with the failure of marxists to recognize the importance of the unconscious in their treatment of ideology and in theories of political action.³⁴ The appropriation of psychoanalytic theory was an attempt to incorporate this dimension of social reality. The problem was not that aspects of psychoanalytic theory were incorporated, but that they came to dominate over and eventually eliminate the materialist basis of patriarchy in many feminist theories.

The period was heavily influenced by the work of Louis Althusser and particularly by his conception of ideology and "ideological state apparatuses".³⁵ Reacting against the prevailing economism, which tended to portray a one-way causal relationship from the material (economic) base to the superstructural level of ideology, the Althusserian model attributed ideology with a "relative autonomy".³⁶ However, in many theoretical works this was transformed into an absolute autonomy.

Mitchell's theory of the mode of production is materialist in the orthodox manner, but her theory of patriarchy is totally idealist. Patriarchy for Mitchell is the "universal culture".

*To put the matter schematically...we are dealing with two autonomous areas: the economic mode of capitalism and the ideological mode of patriarchy.*³⁷

The implication of Mitchell's separation of ideology

(patriarchy) from the infrastructure (capitalist production) is that class struggle requires economic change and the wimmin's movement requires a 'cultural revolution'.³⁸

Mitchell threw out the promise contained within Firestone's theory of the possibilities of developing an analysis of patriarchy as a material reality. It is important to understand how easy it is to fall into idealism and to the moralism that always accompanies it. So many theories today are based on the idea that a reevaluation of femininity can change the concrete reality of wimmin's lives, that wimmin are oppressed because of attitudes and beliefs. A materialist analysis and understanding is essential to feminist praxis because patriarchy will not change until material conditions and relations are effectively attacked.

(3) Michele Barrett

Michele Barrett provides a rigorous analysis of the many contributions to theories of wimmin's oppression. She works systematically within the requirements of the dialectical materialist method which she acknowledges as a realist science.

*It is in a fundamental sense predicted upon the notion that there exist real relations in the world of which we can have reliable knowledge.*³⁹

In keeping with the methodological directives of dialectical materialism, Barrett constantly draws attention to the need for analysis based on the investigation of real historical and social conditions. She warns against the dangers of reductionism in marxist theory, particularly the tendency to reduce the oppression of wimmin to the effects of capitalism.⁴⁰ Unfortunately Barrett herself falls heavily

into this very trap. She fails to recognise 'real relations' between wimmin and men, and the only real relations apparent to her are those of capitalist production. Her theory of patriarchy therefore lacks a material infrastructure. Barrett's reconstruction of the patriarchal family form illustrates her theory.

It is generally agreed in feminist literature that the family is the primary institution in which wimmin are oppressed, and Barrett agrees with this analysis. Her particular view of the family is based on what she sees as its ideological construction. She correctly rejects the transhistorical notion of "the family", claiming that it is invalidated by historical variation.⁴¹ Her criticism relates to her suspicion of theories founded on biological definitions of gender, and it is a sensible one given the use of biological categories to effect the naturalisation of gender relations. Barrett is guarding against the assumption that gender divisions are the inevitable outcome of physiological differences. However her reaction against the dangers of biologism leads her to dismiss the mode of reproduction as a material infrastructure.

Barrett's second criticism of 'the family' is the disjuncture between the idealization of family life (romantic love; feminine nurturance, maternalism, self-sacrifice; masculine protection and financial support) and the concrete reality of family existence.⁴² She concludes that 'the family' does not exist other than as an ideological construct.⁴³

Barrett is mistaken, the family is a social form of real relations of reproduction. The ideology of familialism

does not negate the reality of the family, neither do the contradictions involved, since families are social forms with real basis. Barrett can only explain the family form at an ideological level because she can detect no material infrastructure in which to ground it, apart from capital, and she correctly shows that capital cannot be shown to be that.

Throughout her analysis Barrett tends to locate the oppression of wimmin at the level of ideology, although she states that it should not be treated exclusively as such. The material level she looks to is exclusively the mode of production, and she identifies the material grounds of wimmin's oppression in the economic dependence of wimmin on men within the family institution. In this aspect her analysis is materialist, but it acknowledges only one material base, capitalism. Because she neglects to consider the existence of a reproductive infrastructure, Barrett is forced to invoke a type of psychoanalytic theory of gender construction. She does not analyse wimmin and men relationally, because she detects no 'real' relations, but only ideologically.

*It is therefore, in an ideology of family life as distinct from concrete families, that gender identity and meaning is reproduced.*⁴⁴

*It is important to understand ideological configurations such as 'the family' in terms of the production and reproduction of meaning rather than through some notion of false consciousness.*⁴⁵

Although Barrett qualifies her view of the ideological construction of gender as "concrete collectivities", she does not save her theory of patriarchy from idealism. We must recognize that wimmin and men are not constituted through the ideological production of 'meaning', even though

this might be a powerful component. People are transformed from biological sex categories into social gender through the operation of real relations in concrete social and material conditions.

Barrett acknowledges that social divisions based on biological differences preceded capitalism, but she argues that developments in the forces of production (reproduction), for example contraception, have rendered biological differentiation a less plausible basis for the social division of labour based on gender. Her analysis of the effects of technological change in the means of reproduction for wimmin is simplistic. Technology is never unproblematic, it embodies the dominant social relations, both patriarchal and capitalist.

The division of childcare work is largely attributed by Barrett to the ideological construction of gender. At an infrastructural level, she identifies the wage system and male privilege within the workforce as compelling wimmin to be childcarers, but she fails to examine the relations between wimmin and men or why men rather than wimmin have the privileges in the wage system. She asks, not what does the family do and why, but who does it benefit?

While Barrett acknowledges that wimmin have the least interest in maintaining the present form of the family, she claims that despite their privileged positions in the workforce, men are disadvantaged too, because they are deprived of "significant access to their children", and she says that they find this oppressive.⁴⁶ Barrett completely misses the point that the ability of males to have 'insignificant' access to children (= childcare) is the basis of their privileged position within the workforce.

The family institution is not an ideological construct, it is one of the real, concrete institutions in which both the patriarchal and capitalist infrastructures find expression. One and a half wages are paid out, rather than two, and childcare labour is free. Male privilege is secured through the dialectical relation, and wimmin are trapped by it. Unable to live on the female wage, wimmin have little choice but to submit to the gender structure of the wage system.

Michele Barrett locates the oppression of wimmin in the forms taken by the social relations of capital, and in the ideological construction of gender 'identities'. Her theoretical schema is ultimately analagous to that proposed by Juliet Mitchell. Unable to grasp the existence of real relations other than those thrown up by the mode of production, she is forced to take up an idealist position on the oppression of wimmin, despite her understanding that material dependence on men is central to patriarchal oppression. To her this derives from the mode of production, and so failure to consider a real reproductive infrastructure leads her to an idealist construction of patriarchy.

(4) Heidi Hartmann

Heidi Hartmann grounds patriarchy firmly in a material infrastructure. She argues that patriarchy is not simply a psychic, but also a social and economic structure.

Hartmann defines patriarchy as, "a set of social relations between men, which have a material base and which, though hierarchical, establish or create interdependence and solidarity among men that enables them to dominate women".⁴⁷

The material base as she sees it, lies fundamentally in male control of wimmin's labour power, and in their ability to exclude wimmin from access to essential productive resources.⁴⁸ Her analysis of patriarchy and capitalism formulates the two into a "dual systems theory" because she claims they operate in a partnership.

Hartmann argues that the partnership of capitalism and patriarchy is not inevitable. Capitalists and men often have conflicting interests, particularly over the use of wimmin's labour power. According to Hartmann, an historical examination of these tensions is the most useful approach to investigate the material base of patriarchy in capitalist society.⁴⁹

Hartmann's definition of patriarchy as a set of social relations between men is problematic, as it explains nothing of the real relations between wimmin and men. Although she recognizes that the human reproduction is socially determined, her view is not grounded in the actual labour processes or relations of reproduction. She tends to focus on the forms by which males secure their privileged position within the workforce, rather than attempting to isolate specifically patriarchal mechanisms.

While Hartmann's analysis is materialist and dialectical, she is unclear about the causal mechanisms of patriarchy. She recognizes that capitalism and patriarchy are interlocked, but she attributes neither with determining influence. This undermines the explanatory power of discrete theories of both systems. By giving equal significance to the social relations of reproduction and production, her theory makes it difficult to know what it is wimmin should

be most concerned to fight against.

In the real world the effects of the two infrastructures exist together, and Hartmann's understanding of this is very important. However, her theoretical schema is inadequate, since it is unable to explain the connections among the determining influences or how social forces are played out in people's lives.

(5) Zillah Eisenstein

Zillah Eisenstein's writing is at the forefront of materialist feminism. Her work contains an implicit theory of the mode of reproduction, even though it is never clearly formulated.

Eisenstein recognizes the existence of a real patriarchal infrastructure. She claims that the departure point for investigating wimmin's lives is "motherhood itself".⁵⁰ Unfortunately, she does not pursue the enquiry and so she cannot clearly isolate the social context and the labour processes of reproduction. Her overriding concern is to grapple with the dialectical relationship between modes of reproduction and production, that is patriarchy and capitalism.

In essence Eisenstein retains Firestone's theory of a material infrastructure, avoiding the trap of biologism. The patriarchal dynamic of the family, according to Eisenstein is "carried over" into each "economic period".⁵¹ In an analytic move similar to Firestone's formulation, she claims that the political control of wimmin as reproducers is used to sustain the economic class arrangements of society."⁵² The movement is from the social relations of reproduction to the social relations of production. The connection between

the bearing and rearing of children is viewed by Eisenstein as a "political one", deriving from the power relations of reproduction.

Eisenstein locates the dynamic of patriarchy in the set of controls which are developed to confine women to social reproductive labour. She argues that the particular form taken by the struggles to keep women in this role cannot be known in advance, but must be investigated in each set of historical and social conditions.

Although Eisenstein locates the material conditions in which the controls are established in the gender division of labour, she fails to subject this division of labour to close examination. Where childcare labour is considered, it is analysed largely in terms of the capitalist wage system and of the relations of production. While claiming that the social activity of childrearing is central to the establishment of male power, she does not deal with it purely in terms of the social relations of reproduction, nor in relation to the total social process, that is of childbearing and child-rearing. Lacking a clear analysis of the social process, her argument as to the possible origin of the gender division of labour is weak and idealist.

*...perhaps a fear of woman's reproductive capacity, given the lack of biological knowledge of just what it entailed-no longer exists as such. But society still needs a sexual hierarchy because of the way its relations have been structured since then.*⁵³

Eisenstein claims that patriarchy exists because it provides the "mothers" of society, but this is not an adequate explanation. Neither 'society' nor children need 'mothers', mothering is the social form taken by patriarchal childcare work. Children require care, it is socially

necessary work, and someone has to do it. Patriarchy exists because men have found a way of escaping that work, of dumping it onto wimmin. And they have achieved this on the basis of real material conditions and processes, not because the idea exists that wimmin should raise children. Eisenstein recognizes the latter, but she has not successfully separated the social form of childcare from the real relations that determine it.

The role of men, their activity, or more precisely their inactivity, in reproductive work constitutes the other side of the internal relation. Outside of the social relations of production, this aspect of the reproductive relation is rarely touched upon. The material conditions on which 'maleness' is established is the other side of the 'dialectical coin' and needs to be addressed.

I have found some of Eisenstein's insights particularly helpful in applying the dialectical materialist method of abstraction. Her comments underline the difficulty of separating the social relations of reproduction from the social relations of production.

None of the processes in which a woman engages can be understood separate from the relations of the society, which she embodies and which are reflected in the ideology of society...[T]he social relations of society define the particular activity a woman engages in at a given moment. Outside these relations "woman" becomes an abstraction. A moment cannot be understood outside the relations of power which shape it and the ideology which defines, protects, and maintains it.⁵⁴

From Eisenstein I take the directive to examine the political implications of childbearing and childrearing and to ground them in a material infrastructure. Although she has not pursued this investigation, Eisenstein's theory of the links between reproduction and production contains

an implicit analysis of the determining influence of the social relations of reproduction, established on the basis of childbearing and childrearing.

Although I have only briefly reviewed five theorists, they were chosen because of their immense contributions to the development of feminist materialism. Their failures as well as their successes are essential to the growth of theory and praxis. Through the insights of Eisenstein and the methodological example of Michele Barrett, I hope to return to Firestone's materialism, and recover it from the crude biologism in which it was formulated. Before I introduce the method I have used, it is helpful to reassess the problems within the theories in light of the aims of this enquiry.

6. Re-examining the Mode of Reproduction

One of the major problems in the theories of feminist materialism has been the failure adequately to isolate a real patriarchal infrastructure. This is an extremely difficult but necessary task, and one in which I hope to participate.

As I mentioned earlier, materialist research, both marxist and feminist, has tended to withdraw from concrete studies and to become excessively absorbed in theoretical discussion. The endless debate over the utility of the term 'patriarchy' or 'reproduction' are some examples. Theoretical clarity is important, but deciding on the validity of a particular term is not a matter that is entirely internal to theoretical discourse. The success of a theory is not decided by the theoreticians themselves. It is measured by the degree of correspondence between 'thought' or theory and

material reality. Mao comments, "The truth of any knowledge or theory is determined not by subjective feelings but by the objective results in social practice. Only social practice can be the criterion of truth."⁵⁵ However, I feel that the reluctance closely to examine the social labour process of reproduction is not solely attributable to the fear that empiricism will taint concrete studies. Possibly it is also due to the not unreasonable fear of inviting the charge of biological determinism.

The failure adequately to ground the theoretical propositions concerning the mode of reproduction in empirical research has hindered the work of distinguishing the social relations of reproduction from the capitalist labour process. For this reason, I believe that the political implications of reproduction are not yet fully understood.

The development of feminist materialism requires moving down from the more highly abstract levels of analysis, so that the empirical experiences of gestation, conception, birth and childcare can be considered in the light of the more general influences. For this reason I chose the empirical method of interviewing wimmin to discover how far my view of the mechanisms responsible for the social forms of patriarchy correspond with wimmin's concrete experiences of patriarchal reproduction.

(1) Interviewing wimmin

The lack of empirical research undertaken by writers who postulate a patriarchal infrastructure also relates to the difficulty of "testing" the hypotheses. The underlying level of reality is not observable in the manner prescribed

by empirical methodology. This means that the empiricist concern with verification as a 'truth' criterion is inapplicable. If observability is a significant criterion for testing then the hidden level of reality would be ruled out of existence by the method of enquiry. To have reliable knowledge of the real relations we have to work retroductively from concrete experience, since the method of assembling statistical data about features of wimmin's lives would reveal something of the manifestations of the real relations but not the real relations themselves.

For the above reason, the conventional interviewing methods such as postal surveys and close-ended questioning were unacceptable. Instead I used the indepth interviewing technique, one which has become an important method of feminist research.

A major aspect of the feminist method is breaking down the power relationship that typically characterize the 'interviewer/interviewee' situation. According to conventional, androcentric methodology, the interviewer must become detached and impersonal. Ann Oakely comments -

*An anthropologist has to 'get inside the culture'...
A feminist interviewing women is by definition
both 'inside' the culture and participating in that
which she is observing.*⁵⁶

Most of the wimmin I visited several times, for a period of 2 to 3 hours. It takes time, time to establish trust and liking, time for swapping life herstories; family, health, friends, past lovers, and so on. This happened in most but not all of the interview situations. For this reason I used 13 interviews, a few I decided against using in the end because I could not elicit information about the wimmin themselves. I think this was probably due to personalities,

and to my lack of experience. I was the wrong person to interview those particular people. I interviewed one man, on the basis of his role as primary childcarer of two children, but I decided against using the interviews. While his experience deepened my general understanding of patriarchal reproduction, I felt they introduced a dimension to the study I was unable to explore.

All of the interviews were typed up verbatim, including the ones I decided against using, including every sigh, laugh and interruption from children. The episodic nature of the interviews was structured by the episodic nature of the wimmin's lives. The interviews were fitted around the needs of children and partners.

I did not interview wimmin with a set of close ended questions - "Are you oppressed by your husband: Tick Yes or No?", and I did not want to predetermine the range of responses by containing the areas of discussion. I had no preselected set of questions, merely themes around which the wimmin spoke freely. Several people asked me how I "got them to talk?" In most cases it was not a problem, barring personal shyness. After the initial awkwardness, often due to my ineptness with a tape recorder and the unfamiliarity of having a conversation preserved, the responses given were rich and detailed.

To gain an understanding of the operation of hidden social forces on people's lives, indepth interviewing is extremely important. Often statements are made obliquely, or in reference to another person, or through other things. Experiences emerge in piecemeal fashion in the course of long conversations. I was overwhelmed by many of the

experiences in the wimmin's lives. It was a long and difficult process attempting to isolate the social forms from the mechanisms responsible for them.

I did not realize until much later how valuable all the long hours of typing would be. It was only after several months of reading, rereading, and then chopping copies up and shuffling them around the room, that certain important aspects became apparent. Had I not typed them up, word for word, a great deal of valuable material would have been lost through failing to recognize its significance in the early stages.

The method I used to contact the wimmin was 'random', chiefly through a suburban creche, a Public Health nurse who works in South Christchurch, and through the 'snowball technique'. Seven of the wimmin I originally contacted put me in touch with wimmin they knew with preschool children.

The age of the wimmin was roughly limited by the stipulation that they have at least one child under five. This involved a conscious decision to elicit the experiences of wimmin involved in the immediate childcare years, or "inside the experience", rather than to seek reflections back over the years.

While it was impractical to attempt to obtain a precise representation on the basis of class position and race, I tried to get a fair representation of experiences. Of the 13 interviews used, 11 wimmin were white New Zealanders, 1 Maori woman, and one emigree from Scotland. Overall the class position of the wimmin tend to be more working class than middle class. Two of the wimmin ^{were} parenting on their own, 3 had never married, and 2 who have previously been married

were living apart from their husbands.

Most of all, I enjoyed the interviews and met some wonderful wimmin. I learnt more about patriarchy from their conversations than I would in a lifetime of reading 'secondary sources', most of which are written by men or by wimmin like me, with no experience of childcare. Some aspects of the interviews were painful, particularly those concerned with male violence.

A regular moment came at the close of the first interview, standing on the doorstep, when two comments were made, roughly translated as -

"I hope I didn't sound like a moaning bitch."

"And tell me - what's this got to do with politics?"

I conclude with a discussion of the difficulties involved in applying the dialectical materialist mode of abstraction to a concrete study.

(2) Problems and False Starts

Having chosen to undertake a concrete study of female/male social relations, I discovered that the attempt to show the relations of reproduction in abstraction from the social relations of production was impossible, unless I worked on a purely abstract level. Male violence against wimmin can be used as an example.

The concrete form male violence takes in capitalist patriarchy involves many determinations and relationships: the man committing the violence, the woman being assaulted, the police, the legal system, refuge systems, and so on. In the aftermath of rape, a woman in this society is treated differently than in a Middle Eastern country, for example, where she may be persuaded to kill herself, or the men of the

family might kill her. In both patriarchies the wimmin are blamed for the assault, but the form that this takes varies enormously in different social formations. As Eisenstein comments, none of the processes in which a womin engages can be understood separately from the relations of the society.

Extracts from the interviews are used to illustrate various aspects of the social process, but they are rarely reducible solely to the mode of reproduction. I explained earlier that each aspect is the product of a variety of social forces emanating simultaneously from the most fundamental mechanism as well as from a range of subordinate mechanisms. It is very easy to fall into the trap of reductionism and over simplify^{the} social totality. However, this in no way refutes the methodological procedure which isolates and abstracts the mechanisms from one another for analytic purposes.

I argue that the real aspects of the social infrastructure can only be understood in the context of both reproduction and production. However, in order to ascertain the functioning of the whole, essential relations must be separated out and analyzed in abstraction from the rest. Therefore it is important that the structure of the whole is made explicit so that the parts dealt with in isolation are understood in their essential interrelationship with everything else. All social phenomena are linked in some way, but as soon as actual details are added, the interrelationships threatens to swamp the particular aspect which has been held up for inspection. David Harvey discusses this problem in an enlightening way.

Harvey notes that it is both a virtue and a difficulty in Marx that everything relates to everything else. This is

the essence of the realist view of the world. He comments, "It is impossible to work on one 'empty box' without simultaneously working on all other aspects of the theory".⁵⁷ The form of argumentation focuses on a particular aspect of the whole, and as Harvey observes, the difficulty lies in preserving the focus while keeping the relation to everything else broadly in view. I can illustrate this problem with my own work.

To show how the social isolation of the reproductive worker is a patriarchal mechanism, in concrete terms requires introducing the forms specific to capitalist patriarchy, public and private transport, the geography of urban housing and the family institution which is a product of both infrastructures.

Birth at the phenomenal level is inseparable from the capitalist medical institution. The social relations of reproduction are less visible than the relations embedded in the expert/patient relation and the hospitalisation process. The technology involved in birthing practices embodies the contradictions and forces of both patriarchy and capitalism. We can isolate and abstract reproductive mechanisms, but when concrete detailing is introduced, aspects of the capitalist infrastructure are inevitably introduced.

Harvey comments that no one seems to have found a way to integrate theory and history, to preserve the integrity of both while transcending their separation.⁵⁸ If I wrote down the theory as abstract conception and threw out the rich detailing of wimmin's actual experiences of patriarchy, the theory would not correspond with concrete reality.

The logic of abstraction entails isolating each moment

in the social labour process and ordering them according to the strength of the social forces they are hypothesized to wield. However, it is the combination of the simple mechanisms that comprises the patriarchal mode of reproduction. While I argue that the social relations of the simple mechanism set the limits within which the other mechanisms, the weaker mechanisms, operate, it is the total social process which ensures the predominance of male social power. The simple mechanisms are isolated analytically and the more fundamental ones held up for inspection in abstraction from the subordinate ones, but their broad interrelationships must be kept in mind at all times.

In his discussion of Marx's method, Harvey explains how Marx shifts from one set of relations to another, using insights gained from one relationship to establish interpretations for another. Harvey borrows an image from Bertell Ollman to describe this process.

Marx sees each relation as a separate 'window' from which we can look in upon the inner structure of capitalism. The view from any one window is flat and lacks perspective. When we move to another window we can see things that were formerly hidden from view. Armed with that knowledge, we can reinterpret and reconstitute our understanding of what we saw through each window, giving it greater depth and perspective.⁵⁹

The view from each 'window' onto patriarchal reproduction exposes a set of internal and external relations, each with their own contradictions. Part of the task is to work out which contradictions are internal to the relation and which are contingent upon the particular social forms taken by the relations. This has been extremely difficult at each step and through each 'window'. Because childbearing and childrearing occur in the context of institutions thrown

up by capitalist patriarchy, each moment takes on a form specific to the combined effects of both modes. I am still in the process of separating them out, throwing out formulations that do not make sense of the reality, knowing that the work of 'mapping' out reality is never ending.

As I mentioned earlier, instead of organizing the argument in its experienced temporal sequence, I present the moments in the social labour process in the order of the relative strengths of the forces they are hypothesised to generate. As I locate the most fundamental mechanism in the social relations established during gestation, this is my starting point. I argue that male social power stems from the role of the non-worker in the process of gestation and that this power, once established, predominates over all other stages in the reproductive labour process.

The next 'moment' I analyse is conception. I argue that the social relations established at gestation predominate over conception, empowering males to exert force over women in sexual relations, and enabling them to get away with violence. It is in this context that the institution and processes of heterosexuality are analysed. Initially conception is abstracted from the means of contraception, which is then introduced on the assumption that the social relations of production are embedded in the development of the means of contraception.

Next I analyse the labour process and the social relations of birthing. I begin with the attempt to isolate the mechanisms of male power which induce submission in women at this crucial stage in the labour process. Finally I examine the patriarchal form of childcare. While it is

a subordinate mechanism it is the stage at which wimmin
experience the worst effects of oppression.

FOOTNOTES

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CHAPTER TWO

THE SOCIAL RELATIONS OF PREGNANCY

1. Introduction

Pregnancy is not an illness, nor is it debilitating and it has no effect on a person's intellectual capacity. I argue that pregnancy is a social activity with potential effects for the political relationships between wimmin and men. The concrete conditions under which this potential is likely to be activated will be explained.

The significance of wimmin's capacity to bear children is generally used in political arguments to justify their inferior social position. Patriarchal ideology has traditionally located wimmin's oppression in the biological differences between the sexes. Nature is said to have bound wimmin over to the dictates of their reproductive organs, which thereby determine their role as childcarers and equip them with an innate disposition for nurturing. Wimmin are believed to be somehow closer to Nature than men, whose role as the makers of Culture drives them to control and subdue the forces of the natural world. The political future of the sexes has been decided upon by virtue of the distinction between those in possession of a uterus, ovaries and mammary glands, and those who are not.

The response by some feminists to the belief that wimmin's biology is inherently inferior has been to deny that physiological differences between the sexes have any political

significance whatsoever. Biology, they say, is invoked to justify the oppression of wimmin the real cause of which lies in men's occupation of the institutions of power: government, industry, trade unions, and educational and medical institutions.¹ On this understanding the path to equality with men is to compete equally with men.

Social power is concentrated in institutions dominated by men, therefore the political solution is for wimmin to become directly involved in the public process. They must enter parliament, gain seats on public and corporate boards, and scale the trade union hierarchy. There is nothing wrong with these kinds of jobs if you can get them. The question is why are the successful applicants overwhelmingly male? There is a major flaw in this argument, in its analysis of power and therefore in its theory of change, in patriarchal society wimmin never compete equally with men, and the reasons why this is so must be the object of the analysis. In this thesis I argue that at the most fundamental level male dominance over wimmin derives from the political effects of the social relationships involved in childbearing. The grounds of the unequal power relation are not found in the social organisation of production, as orthodox marxists would have it, or in the public exercise of power, as the Liberals believe. Rather they are located in the social relations of human reproduction.

A non-causal explanation of male domination would account for very little since like all social phenomena, male domination is the combined effect of a multiplicity of causes. However the causes are never of equal significance, for each exerts either a greater or lesser force in relation

to the others. While I make the argument that the social relations of pregnancy are fundamentally determinative through their political effects, I am not claiming that male power can be reduced to just this one factor. The combined set of forces is complex and cannot be understood on the basis of just one 'moment' in the entire process of human reproduction but only in relation to the whole.

In order to explain what is meant by the political effects of pregnancy I make two assumptions. The first assumption is that all women are equal under patriarchy. The differences among them according to race and class are temporarily ignored, that is, abstracted from. There are only two 'classes' of people, female and male. The second assumption I make is that pregnancy can be isolated from the total social process and examined on its own. The latter assumption is temporarily dropped in the anthropological discussion which follows.

I have chosen to use anthropological debate to broaden and enrich the view through the 'window' onto the most fundamental mechanism. Examining social formations from the past makes it clear that the politics of childbearing or reproduction in this society is not an isolated case. Despite the enormous variation in the forms of male domination there are certain causal mechanisms which underly every patriarchy. Invoking the past to help clarify the view of contemporary capitalist patriarchy is also helpful because the power relations which characterize this society tend to be less visible than in previously existing patriarchies. By examining some of the processes by which males have asserted themselves over women in the past, contemporary forms of

oppression become clearer and the analysis more tangible.

I begin with a general theoretical statement outlining the social context and the potential political effects of pregnancy, and then examine some of the debates on the significance of human reproduction that have been thrown up by anthropology.

2. Pregnancy is a Social Process

The success of male ideology rests on the capacity to make pregnancy and everything surrounding it, appear to occur naturally in a woman's life. According to male belief, pregnancy is unproblematic for women, presumably as it is for kittens and heifers. On one level it is presented in such a way that men seem to have nothing to do with it. There is only one social relationship involved and that is between a woman and the foetus she carries. In some versions, women commune mysteriously with "Nature" and a baby appears. Apart from the fact of sexual intercourse, which people conclude as having taken place, pregnancy does not appear to involve a social relation between female and male, so much as a relation between woman and foetus.

Underlying the mysticism and ideology of naturalism is a social relation between female and male, and this real relation shapes the social construction of pregnancy. There is no event or process experienced by human beings that entails a 'pure' relationship with "Nature". It is widely accepted that humans constantly act upon and transform nature to produce the means of material subsistence, but the manner, in which humans reproduce their physical selves, the human species, is always heavily disguised by naturalism. In

reality, what is reproduced is not a physical, but a social being.

If pregnancy is understood not as an immutable biological function, but as a technique in the same way as any other activity in which humin's engage, the social relations which shape and control the experience become visible. The social relations of gender always assume the form of a naturally occurring phenomenon. When something is presented at the level of nature it is set outside of humin control. It appears neither the outcome of social manufacture nor of political change.

Pregnancy is not 'natural' in the sense that it occurs outside of humin social relations and organization, nor is it immutable as a technique for reproducing the species. The technology now exists to enable men to do the work of childbearing, but until there is a fundamental change in the gender relations this potential will not be realized. The development and distribution of technology is never indifferent to social power. Technology has no existence independent of the social relations that dominate society.

Both the methods by which people are reproduced and the methods by which people produce the means of subsistence embody power relations between people. Eating can be viewed as a physiological process in the same way as pregnancy can, but there is no law of nature that determines how often people eat, or the nutritional content of their diet. The manner in which humins satisfy hunger involves a social context and the differential access of people to food involves political struggle. Pregnancy, no less than eating, is the outcome of a distinct social process.

The antagonisms which exist between unequal parties in a social relation enter into every activity and every exchange. The fact that the work of pregnancy takes place within a person's body does not immunise or remove it from a social and political context. It is this unique feature of pregnancy, that the work is inseparable from the worker, and cannot be offloaded onto someone else, that is transformed by ideology into the belief that pregnancy is an entirely natural phenomenon, with no political implications.

3. Pregnancy is a Social Activity with Potential Political Effects

To claim that childbearing has political implications for oppressed wimmin is fraught with risks. The danger stems from the possibility of reinforcing the legitimization of male power on the basis of biological difference. The two arguments are fundamentally opposed, but hazards are involved in analyses based on biology.

The most important difference between my argument and patriarchal ideology is that the latter denies the social and political context of reproduction, because it attempts to naturalise the social relations between female and male. Wimmin's social role is presented in terms of an innate predisposition towards certain tasks: childcare, cleaning, and food preparation, and a corresponding set of personality traits, such as maternal nurturing, passive and self-sacrificing. Male ideology consistently obscures the reality of socially constructed gender.

The essence of political phenomena is the possibility of change. By naturalising the gender relation the roles

are made to appear fixed and eternal. An analysis of male domination that takes into account biological differences in the reproductive division of labour is therefore a political argument, if it is able to explain how the power relation constructed on the basis of the division of labour can be changed. Although the socio-political effects of pregnancy have a determining influence on the balance of power in patriarchy, they are not predetermined. The Freudian maxim, "Biology is Destiny" is socially and historically contingent, for it is only under a distinct set of social conditions that males can exploit wimmin's work in reproduction and assert dominance. The antagonistic relation always contains the possibility of struggle and change. My argument is that the political effects of pregnancy, given a distinct social context, are determining, not that they are predetermined.

In the vast range of humin labour which is necessary to secure the production and reproduction of real life, there is only one job that males are unable to do; sustain gestation and give birth. Only wimmin can be the workers at this stage in the reproductive process.

Pregnancy is not debilitating, it is not an illness. Assuming that pregnancy is a matter of choice and that the womin enjoys reasonable health, diet and support, the physical limitations are not in themselves significant. The conditions which make them so however, are socially determined. While the work can be hard and exhausting particularly in the latter stages, there is nothing in the work process itself that predetermines wimmin's political weakness. What is involved in the division of labour, whereby wimmin are pregnant (the worker), and men are not (the non-worker), is the potential for men to gain the 'upper hand', which they

accomplish by organising the world in their interests.

At the most fundamental level, men can, under a wide range of circumstances, secure a political advantage over wimmin by exploiting the relative decrease in mobility experienced by wimmin as pregnancy progresses. The difference in freedom of movement between the worker and the non-worker might be only marginal, but to that extent it allows men more extensive movement and greater social access to places, people and activities. While wimmin are only mildly constrained by the demands of pregnancy, men are totally unhampered because they are doing nothing, therefore they are free to pursue their interests, to travel any distance in order to do so, to invest unlimited energy in organising events, meetings, institutions and alliances. If mobilising resources serves an express purpose, if it will be politically advantageous in any way, then males do have a potential edge over wimmin. The difference is marginal, but it is sufficient, given a social context in which something can be gained by exploiting the distinction.

In every patriarchal society, social forms have developed which build upon this difference, accentuating and formalising it into institutions. In some patriarchies the work of reproduction is spatially separated from production of the means of subsistence. The ideology of the private nuclear family claims that this is both natural and necessary, that it 'stabilizes' family life. However, the spatial confinement and marginalization of wimmin is achieved, fundamentally, on the basis of exploiting the social vulnerability of someone doing the work of pregnancy. One difficulty in making this argument is that the institutions

in which the process of immobilising wimmin takes place, always assume the appearance of 'natural' outgrowths of particular societies, or as their 'cultural' expressions. For example, in Islamic societies a highly elaborate patriarchal mechanism was developed for controlling female mobility. The "purdah", meaning screen or curtains, confines wimmin to the household, and within the house, screens further "shield" them from male visitors.² When wimmin move about in public places they do so invisibly, physically covered from head to toe in a concealing garment. The gender power relations are also made invisible, through the studies of androcentric scholars who refuse to 'see' the political reality underlying the social form. They 'see' what they 'observe', which is a cultural or religious practice.

If as I claim, men's greater social power is not predetermined by the reproductive division of labour, under what material conditions does childbearing become socially transformed into a liability? This question is explored through an examination of anthropological research, but I can briefly summarize the argument by claiming that it is only under conditions in which the existence of a social surplus enables one group of people to become a 'leisured class', by forcing another group to take on more of the socially necessary work, that a distinct male and female political interest emerges. Patriarchy did not await the development of private property; any kind of social surplus can initiate a political struggle over its production, distribution, and control.

There is one more feature of pregnancy that plays a fundamental part in the process whereby males gain social power: control of the (ultimate) means of force. Again it

is only a potential advantage to male political power since it does not predetermine the outcome of the gender struggle in any way.

Working out the grounds of male control of force is as important as discovering through retrodution, the marginal social advantage males acquire through the physical limitation on wimmin's movement during pregnancy. Male violence is pervasive in this society and the dominating form of sexual aggression obscures the real relations involved.

There is no moment in the history of gender that can be pointed to, and the claim made, "the sexes went into battle and men won". Men do not dominate society by virtue of their superior physical strength, or their use of weapons, but in some societies violence, and the threat of violence is a systematic means of keeping wimmin in line, in a subordinate position.

Wimmin are potentially disadvantaged, not because men are physically stronger, but because there is a stage or 'moment', in their lives when they are less able, not unable, to engage in certain forms of violence than men. Pregnancy involves a degree of physical vulnerability to aggression, particularly as the foetus grows and is nearing full term. This can put wimmin at a distinct disadvantage in situations where they are without support, where they are isolated and are therefore unable to congregate for mutual defense. Separating wimmin from each other is accomplished through a variety of means. In capitalist patriarchy, wimmin are physically separated, they are individually isolated within the nuclear family. At an institutional level, (police, law courts) public patriarchal forms maintain the power of men

to use force against wimmin. The closer the relationship with her assailant, particularly if the violence includes rape, the less able a woman is to claim abuse. The material structure and the ideology of the sanctity of the nuclear family facilitates male power to violate wimmin behind closed doors. But within any family form, a woman's economic dependency on her assailant secures his monopoly on violence and her powerlessness.

Violence only becomes systemic in a relationship between two distinct classes of people when one group has gained a position of social dominance. This determines their ability to get away with using force, or the threat of force against the subordinate group. It derives from a social relationship, not from superior musculature or weaponry.

Patriarchal ideology has traditionally legitimated male violence on the basis of genetic difference, that somehow men have a greater propensity for aggression than wimmin. While there is no convincing evidence that wimmin are innately more passive than men, there is overwhelming evidence to suggest that in patriarchal societies, wimmin have little recourse but to submit to the use or threatened use of violence for economic and socio-political reasons, not biological.

In anthropological discussion I endeavour to show, through illustration, that the sexual division of labour was only transformed into a social division of labour under certain conditions. When the production of material subsistence no longer requires the full participation of every person, and the possibility of a surplus of goods arises, the potential exists for one group to appropriate the surplus

and to obtain a privileged position within the community. There are many different forms of surplus, cattle grain, commodities, and so on. The actual form of surplus is unimportant. What becomes important is the potential for one group to become, in some measure, a leisured class by obtaining control of that surplus. This enables them to secure the economic dependency, and hence the political subordination of the non-privileged class. Once this has occurred, violence can become a means of backing up the power of that class, and they can get away with it because their superior access to the group's resources is a source of real power.

The degree to which violence characterizes the social relation varies greatly in societies as anthropological and ethnographic research demonstrates. Where violence is systematic, rather than isolated and sporadic its use, from being potentially established at the most fundamental stage of childbearing, is carried out into other stages in the reproductive process, into social production and throughout the total social system. The relation of dominance and submission becomes the defining social characteristic of the gender relation. But just as male aggression is a political strategy that is socially learnt, under certain conditions women can organise female solidarity effectively and prevent males from gaining the upper hand.

Before looking at anthropological research I examine some aspects of sociobiology, a theory that attempts to naturalise social relations by reducing them to the level of biological phenomena.

4. Sociobiology: The Ideology of Naturalism

Sociobiological beliefs are diffused throughout social thought and theory, and today they are on the increase. Every ideology that justifies the discrimination of a particular social group on the basis of a physical characteristic has roots in some version of this theory. It is important to address those aspects of the theory that directly relate to the politics of gender, because "biologism" is the central buttress of patriarchal ideology. Furthermore, it is imperative that no confusion arises over the argument which I am presenting and that theory which reduces social and political life to biological categories. Biology is totally unable to specify the social properties or characteristics of human behaviour, or their variation from one social formation to another.

The most serious implication of sociobiology for women is that the division of labour in childcare is genetically determined. The observation that women work as childcarers and men do not functions as evidence of natural predisposition. But more subtle arguments are offered and they relate directly to the fundamental proposition of sociobiological theory - the thesis of the "selfish gene".

One of the major components of the theory, first put forward by the biologist W. Wilson, is that individuals act to maximise their "inclusive fitness", that is, the chances of their genes surviving, by promoting their own welfare and that of their relatives who share their genes.³ The sociobiologist school faced a particular hurdle: they had to explain the existence of non-selfish or altruistic behaviour in individuals. They had to be able to account for altruism,

because according to the theory, genes and individuals who did not act out of self-interest would not survive evolutionary competition.

The solution was found in the redefinition of selfishness, which in effect, reduces altruistic behaviour to a kind of self-interest. W. Hamilton concluded that individuals act altruistically in so far as they can promote the well-being of their own genes by helping relatives who share the same genetic material.⁴ Therefore service to others actually maximises one's own "inclusive fitness". Hamilton translated his theory into a mathematical cost-benefit formula which Marshall Sahlins describes as a "powerful, global logic of social behaviour on the principle of utilitarian individualism".⁵

According to Hamilton, childcare is a special kind of altruism. Parents rear and protect their offspring because by doing so they increase the chances of their genes surviving. This theory was further developed by R. Trivers, who claims that the sexual division of labour in childcare is the direct result of the biological differences between the female egg and the male sperm.⁶ He believes that evolution has resulted in the female investing more food resources for their offspring in the sex cell than males do, and since females invest more at conception, they continue to do so after the child is born, in their 'devotion' to childcare work. Trivers claims that the female's "...initial very great investment commits her to additional investment more than the males initial slight investment commits him".⁷

Not only is the concept of "parental investment" at conception purported to explain the social practice of childcare, it is also offered as an explanation as to why men are more sexually promiscuous than women.

The initial imbalance in parental investment makes the female less likely to relinquish her investment following birth than the male. With a lesser biological imperative to invest in the care of children, the male can maximise his chances in the evolutionary stakes by abandoning the woman, copulating, impregnating, and then abandoning another woman who is similarly predisposed towards childcare.⁸

Since the behaviour of both sexes is determined by the "selfish gene", each sex will try to get the other to invest more work in the rearing of offspring. The social relations are characterized by "battle", as each attempts to exploit the other. However, the competition is not an equal one, as females are weighted down by a genetic disadvantage. In short, the theory implies that male domination is genetically determined.

The argument that human behaviour is genetically determined is fundamentally false. The claim that genes are selfish assumes that they can be defined into separate units for behavioural purposes, and that the organism can be treated as an expression of the genes tendencies. Barker asks, how do we know that behaviour always comes in these units, that packages of behaviour "subserve distinct strategies, each underpinned by a distinct genetic base?"⁹ He replies that we do not know that behaviour comes in such units.

The sociobiologists' claim is based on analogical reasoning. They assume from their observations of animal behaviour that if animals have genetically determined patterns of behaviour, then so too must humans. By abstracting from capabilities which are distinctively human, the socio-

biologists are able to collapse together all organic life to a uniform level of genetic behaviour. They ignore the essential distinction between adaptiveness and adaptability which reveals that the behaviour of the human species is incomparable to all other known species.

A species that has evolved viable instinctual responses is adapted to its environment. The unique feature of the human species is that it has evolved the capacity to learn from and adjust its behaviour to the environment, in light of what it has learned. The claim that the evolutionary success of a species depends upon its responses to genetic determinants and constraints clearly does not hold true for the human species. Humans evolved in such a way that the species is capable of acting on the results of its learning, and of manipulating its environment. As Barker shows, contrary to the claims of the sociobiologists, genes do not learn, it is the organism that learns and acts.¹¹ There is no behaviour that humans transmit genetically, except for the capacity to react intelligently to their world, the capacity to transcend genetic causality.

The sociobiologist account of gender relations is presented at the level of observed biology but underlying the theory is a set of fundamentally social presuppositions. Analyzing the division of labour in childcare as the result of genetic differentiation involves a particular view of human 'nature' for female and male. The implication is that a maternal disposition in women and diffidence in men are genetically programmed. Trivers and his colleagues write as if decades of sociological, psychological and political research do not exist. The claim that women are innately

'maternal' creatures has been successfully demolished. Human nature is not genetically inscribed, it is historically and socially contingent, as are childcare practices and family forms.

The argument that male domination is the effect of biologically given sex differences, particularly the view of innate male aggression long preceded the twentieth century school of sociobiology. The proponents of the current theory are attempting, as Wilson claims, to "biologize" the social sciences and they have achieved the appearance of a valid science.¹²

One of the social theories on which sociobiology builds is the Hobbesian view that competitiveness was given by the 'natural condition of mankind', and that it was the result of the natural inclination of all individuals to pursue their own interest.¹³ In Hobbes' doctrine the three principle causes of aggression rooted in human nature, are first Competition, second Diffidence, and third Glory.¹⁴ Hobbes' view of innate violence is reflected in a comment made by Wilson, that aggression is the "true biological joy of warfare".¹⁵

The sociobiological view of warfare illustrates the methodological weakness of the approach. A naive empiricist reading of war takes the appearance of the phenomenon as the manifestation of its causes. Observing war, sociobiologists would conclude that they were in the presence of an underlying aggression, which explains the occurrence. There is no overt consideration of social and political structures, merely a direct reading of what has been 'observed' and its reduction to a presumed genetic disposition. Sahlins quotes Rousseau's critique of this view.

*War is not a relation between men and men but between State and State, and individuals are enemies accidentally, not as men nor even as citizens, but as soldiers.*¹⁶

When this naive empiricist method is applied to gender the inferior social position of wimmin is taken as evidence that wimmin are inferior to men. If wimmin are observed to be subordinate to men then they must be genetically prepared for the role.

The essential and unique characteristic of humins is that they are social beings. There is no necessary connection between a physical or biological state and a social relation. Humin interaction is not predetermined by genetics or musculature, it is constituted socially, and it is constantly being reconstituted and changed. The relationship between male physical strength and male social power is socially and historically contingent, not pre-ordained.

Engles made the following criticism of Social Darwinism and his comments can be equally applied to sociobiology.

*The whole Darwinist teaching of the struggle for existence is simply the transference from society to living nature of Hobbes' doctrine of bellum omnium contra omnes [A war of all against all] and of the bourgeois economic doctrine of competition together with Malthus's theory of population. When this conjurer's trick has been performed...the same theories are transformed back again from organic nature into history and it is now claimed that their validity as eternal laws of human society has been proved.*¹⁷

Sociobiology uses terms derived from contemporary patriarchal and class society to characterize animal and genetic behaviour and then uses this characterization to justify the status quo in the society from which the political theory was taken in the first place.¹⁸ Sociobiologists' own account of their

method reverses the order of significance. "Evolutionary biology predicts differences in the behavioural inclinations of the sexes, and human behaviour fits the predictions".¹⁹ The observations are laden with the dominating beliefs of society, of which the observers are privileged participants.

The attempt to "biologize" the social sciences functions to legitimate the existing social order. Sociobiology has been used to justify white domination in the same way as it is used to support patriarchy. All racial dislike is claimed to have a genetically-based component.²⁰

The belief that people are at the mercy of their genetic makeup is contradicted by the real and essential sociality of human life. Sahlins comments:

*...for human beings, survival is not figured in terms of life or death or as the number of genes one transmits to succeeding generations. Human beings do not perpetuate themselves as physical but as social beings.*²⁰

Humans are not defined by their organic characteristics but precisely by their capacity to transcend pure physical existence, to act upon and transform their environment. What is reproduced in society is not human beings, qua human beings but a system of social relations and social structures which are never unchanging.

The ideology of naturalism has many diverse forms, some are cloaked in scientific language while others make no attempt to disguise the implicit moralism and reactionary political ideals. In the discussion of anthropology that follows, it is easy to see how a selective reading of social evolution lends itself particularly well to the patriarchal reconstruction of gender, ^{as} much of the research has been crudely androcentric. But the picture that emerges clearly

from anthropology and ethnography is of the infinite capacity of humins for adaptation, of the enormous variation in social and political systems. It suggests that what has a determining influence on the social relations in a given society is contingent upon distinct material and social conditions and upon political struggle. Taking the past into account helps to understand that pregnancy has no existence independent of determinative social relations.

5. Reconstructing the Past

Anthropology is the attempted reconstruction of humin evolution. New evidence and data constantly puts pressure on anthropologists to revise their formulations. One of the most important challenges has resulted from the growth of feminist studies and a major area where a shake-down of theory has occurred is the analysis of the early gathering-hunting societies, formerly explained by the "Man the Hunter" theory.

The study of gathering-hunting, or foraging, societies is particularly important in the study of gender. The social organization of foraging societies reveals the broad outlines of what the earliest humin groups may have been like and provides clues to understanding the social construction of the division of labour in both reproduction and production.

(1) "Man the Hunter" Theory

A major argument in the "Hunter" theory is that co-operative hunting among males demanded more skill in social organization and communication and thereby provided the evolutionary pressure for an increased humin brain size. It is a short leap of logic from this position to the claim

that men were the inventors of Culture/Society and Technology; presumably the female sex was, if at all, dragged through evolution. Scant attention has been paid to the skills and adaptations required for foraging and the raising of the humin young.

Sally Slocum suggests that as humins evolved, the longer period of gestation, more difficult births and a longer period of infant dependency also created selective pressure for increased brain size. It is assumed that neoteny (immaturity of infants at birth with a corresponding increase in the period of dependency) allowed for more time for learning.²² At the same time this learning became necessary through the reduction of instinctual behaviours and their replacement by intelligent, adaptable ones. As the period of child dependency lengthened the female-child relationship strengthened and the earliest family form would have consisted of females and young children. The need to organise for feeding after weaning, the new skills and techniques surrounding increasingly extensive foraging all contributed to the demand for a larger brain. It would seem that the co-operative hunting of large animals could only have developed after the trends towards prolonged child dependency and increased brain size had begun, as it required a larger and more complex brain.²³

In 97% of the gathering-hunting societies classified by G.P. Murdoch, hunting is confined to men and in the other 3% it is chiefly a male pursuit.²⁴ In the "Hunter" theory, the practice of hunting has been construed as the primary moving force of social evolution, as if 'humin nature' can be explained by the male desire to hunt and kill, an

assumption which is itself questionable.

In Man the Hunter Washbourne and Lancaster claim that most of the characteristics we think of as specifically human can be causally related to hunting. "The biology, psychology, and custom that separate us from the apes - all these we owe to the hunters of the past."²⁵ Females stayed at 'home base' gathering what food they could while the males developed co-operative hunting techniques, advanced their communication skills and brought back meat to the women and children who were dependent on the males for survival.

Hunting was a technique, one of many that was adapted for, and contingent upon the material and historical conditions of the time.

*Man the Hunter lasted as long as 'he' did from no natural propensity toward hunting any more than toward computer programming or violin playing or nuclear warfare, but because that was what the historical circumstances allowed. We ignore the first premise of our science if we fail to admit that 'man' is no more natural a hunter than 'he' is naturally a golfer, for after symbolising became possible our species left forever the ecological niche of the necessity of one adaptation, and made all adaptations possible for ourselves.*²⁶

According to the patriarchal view, the division of labour whereby males hunted and females reared the young resulted in the natural selection of aggressive and dominant behaviour in males, and passive, subordinate behaviour in females. A social relation of dominance and submission is imposed on the early human societies on the basis of a false theory of genetics. As Slocum states, every human individual gets half of its genes from a male and half from a female, genes sort randomly. The thesis that the genetic make-up of the male provided the impetus for evolution and social behaviour contradicts even the most rudimentary

knowledge of genetics. Furthermore, a rigorous reading of the evidence demonstrates that women were intimately involved in the development of social techniques.

(2) Woman the Forager

Two of the earliest and most important techniques for producing and reproducing real life developed were containers to hold the products of food gathering and a sling or net for carrying babies.²⁷ Originally infants could cling to the parent's body but with the loss of body hair, as the species evolved, and the increasing immaturity of infants at birth, some device for carrying them became extremely important. If the child could be secured to the body of the parent in some way she could gather food much more efficiently. The invention of a baby-carrying technique was probably extended to the invention of devices for carrying, storing and preparing food.

The technique required for the effective gathering of food is complex, involving the location and identification of plant varieties, seasonal and geographical knowledge and the development of containers for carrying and preparing food. The "Hunter" theory implies that the first tools were weapons invented by male hunters. However gathering was important long before significant animal protein was added to the diet. The techniques required for hunting larger animals were much later developments and it is likely that the early stone tools were not weapons but in fact aids for gathering food.

The argument that females and children were dependent for food upon hunting, and therefore upon men, is false. Even in marginal environments among foraging communities

wimmin can usually gather enough food to support themselves and dependent children. Although hunting has primarily been a male activity, foraging for plants, berries and water was crucial for survival and required the resources and skills of both sexes. Hunting does not deserve the primary place it has been given in the androcentric reconstruction of social evolution.

(3) The Control of Force

Writers generally agree that the male of the species acquired 'ultimate control of force' in early societies but the means by which they gained control and how they used it is far from clear. It cannot be assumed that males have consistently and uniformly used violence against wimmin.

Kathleen Gough believes that the extent to which males had power over wimmin in early societies seems to spring from the male monopoly of heavy weaponry.²⁸ However, while there is extensive evidence of males using force against wimmin, it is not clear that they used the weapons developed for hunting as a means of establishing control over wimmin. Paula Webster lists some ethnographic examples of male violence.

...cases of extreme sexual hostility (most of the New Guinea data); forced sexuality in the form of gang rape (the Cheyenne of the Plains and the Hazda in South-West Africa); general brutality toward women (the Yanamamo of Brazil).²⁹

It seems unlikely that males established control over the means of violence because of the weaponry developed for hunting. If it was only a matter of inventing fighting instruments wimmin were equally capable of doing so. Unequal access to the means of force resided in the technique involved in the sexual division of labour itself. To the extent that

males did protect females from animals and human enemies, the source of the unequal relation to aggression lay in the vulnerability of women to violence during pregnancy and in the period immediately following birth, when they were less able to fight than men. While women carried nursing infants around with them for 4 to 6 years their capacity for flight and for defense was further restricted, having not only themselves to protect but dependent young as well.

Women have always been able to fight. That is not the issue. But their work in the reproductive division of labour at times renders them less able to engage in violence than men. This difference has no necessary outcome, it determines nothing. The possibility of women organizing a defence strategy, for each other is just as feasible. Whether males as a group have exploited this relative vulnerability as a means of strengthening their control over women can only be ascertained on the basis of socially and historically specific studies. In many societies there is no evidence of men using systematic violence against women. In some societies there is evidence that both sexes use sporadic, but not systematic, violence against each other.

Writers generally agree that the early foraging societies were characterized by the most equal social relations known to have existed. Certainly there is enormous variation in the socio-political position of women in such societies but it is generally agreed that in communities where women have been primary producers and material subsistence required the full participation of each person, regardless of sex,

women experienced a degree of autonomy unknown in present day society. Childbearing was not a social or a political

liability. Perhaps the most significant feature of the early communities was the central material precondition for survival: the group depended upon the full participation of each able-bodied person. Co-operative social relations were essential in order to secure the production and reproduction of real life. Under these material conditions, the social possibility of one group of people becoming a privileged or leisured class simply did not exist.³¹

The goal is not so much to prove the existence of a society in which women were equal to or more powerful than men, but to look for clues that would suggest the conditions under which the assertion of dominance of one group over another was possible. These conditions have been found to reside in the development of a social surplus that enables one group to establish a privileged position by offloading more of the labour tasks onto another group, thereby freeing the former for organizing the social and political structure of the community. This roughly indicates the advantage to be gained by dominating a group of people but it does not explain why or how that group has been consistently female.

The study of the early societies has shown the existence of a division of labour based on sex and age. Despite the extensive mobility of women as foragers the tendency was for males to range more widely than females, unencumbered as they were by pregnancy or infants dependent on breast milk. Although the reproductive division of labour shaped the division of productive labour, this did not involve a relationship of dependence, either economic or political, between the sexes.

The hypothesis that best explains the ascendancy of males over females is that the division of labour in

reproduction contained the potential for males to exploit wimmin on the basis of childbearing. Pregnancy itself is not a liability but it can be transformed into a social disadvantage by a political process or processes. However, the situation had to develop where the conditions of socially necessary labour were such that some people could get away with doing less work than others and become in some measure, a leisured class. There is evidence of such a transformation in the following discussion of the Zhū/twasi or "real people" of the South African Kalahari Desert. White researchers have referred to these people as the !Kung San.

(4) The Zhū/twasi Foragers

The most intensively studied foragers in anthropological literature are the Zhū/twasi, and the research has revealed a great deal about the division of labour based on sex and age in reproduction and production. In the foraging groups among these people, wimmin participate on an equal footing with men. They control fertility and the distribution of the product of their foraging labour. There is no evidence of a social relation of dominance and submission between the sexes. However comparative research has shown a change in the social relations between the foraging Zhū/twasi and groups of Zhū/twasi people who have adopted a sedentary farming and herding economy, combined with wage labour.

The Zhū/twasi are only one among many social formations that could be summoned as evidence in a debate on gender. I have included a discussion of the comparative social relations between the foraging and sedentary people not because the data in any way proves that the transition from a foraging

to a food producing subsistence signalled the 'defeat' of the female sex, but to illustrate some of the possible social processes by which men have gained a political edge over wimmin.

Foragers are nomadic people whose movements are largely determined by the availability of plants and water. Wimmin routinely gather plants but they also engage in small hunts and their bushskills enable them to contribute to large hunts through reconnoitring the movement of game. Men also forage during hunting expeditions and assist wimmin in finding vegetation and water bearing plants.³² The division of labour is flexible with the sexes working together or inter-changeably on many tasks, for example, cooking and childcare.

The gathering of food by wimmin is critical to the group's survival. Collected food provides roughly 50% of the daily calori intake and about 60-80% of the intake by weight.³³ Zhū/twasi wimmin not only contribute equally, if not predominantly, to the subsistence of the group they also retain control of the distribution of the food they collect.

Foraging tends to be collective work while hunting is an individual task. Adults spend relatively few hours obtaining food, averaging 12 to 19 a week.³⁴ The work of procuring food is primarily an adult responsibility, and children, the elderly and the infirm remain behind in the camp. Males and females are absent from camp for equal periods, working three days a week and the time spent away from camp is varied so that on any given day, roughly one third to one half of the adults are in camp.³⁵ Adults rather than children are child-carers and the work is performed by both male and female.

Zhū/twasi wimmin take nursing children with them on

collecting trips. On an annual basis wimmin are estimated to walk around 2400 kilometres (1500 miles), and they move camp carrying water and food. Children are generally carried for the first four years, in a back pack for the first year and later on the mothers' shoulders. They are breast fed for a period of four to seven years, or until a subsequent pregnancy. This enhances the child's chances of survival, it helps the womin avoid pregnancy and it means that she has only one child to carry at a time.

Nomadic Zhū/twasi wimmin control fertility through infanticide, although other methods are known and occasionally used. An infant is not acknowledged as a social being until a womin brings it into the camp after giving birth in the bush, either by herself or with one or two wimmin in attendance. Tiffany comments that childbirth is understood to be "tsausi chisi" - wimmin's business. The wimmin control their fertility and births.³⁶

Both male and female researchers have agreed that opposite and same sex relations are characterized by mutual respect and equality. Wimmin establish close and supportive ties with one another. They are free to choose where they will live, and with whom. Their ease of movement enables them to maintain these ties. Tiffany comments that as the wimmin are mobile they are also socially visible and this ensures support from their friends and kin. Neither male or female are economically dependent on the other, both enjoying a degree of autonomy within a relation of inter-dependence.

(5) The Development of Unequal Power: From Foraging
to Farming

Comparative research on the foraging and sedentary Zhū/twasi indicates a distinct set of social and economic conditions in which males asserted themselves over wimmin. The most dramatic changes in wimmin's lives have been: reduced mobility, the development of a rigid division of labour, the spatial separation of reproductive work from productive work and the transformation of childcare work into a distinct social role, associated exclusively with wimmin.

The constraint on wimmin's freedom of movement has had the profoundest impact on them, as they are now excluded from many of the activities and experiences of the men. Herding is attended to only by males, both adults and children. One example of the exclusion of wimmin from male experiences is that the men have learnt the Bantu language of their neighbours, the Herero and the Tswana.³⁷ This alone gives men an advantage over wimmin in dealing with the wider world. Despite some limited foraging, wimmin are mostly confined to the household, and with less opportunity to interact with other people, they become dependent upon the men for knowledge of the world outside their homes. More importantly Zhū/twasi wimmin have lost the visibility they formerly enjoyed, and with it, their effective support system.

The work that wimmin do is now seen as "unworthy of men".³⁸ While males are attending to the herds and occasionally engaging in wage labour, the female children remain behind with the wimmin and learn domestic work. The time spent working has significantly increased as the work of food processing, housekeeping and childcare has become more time-consuming. The exclusion of wimmin from herding, which has

become a source of wealth, has diminished wimmin's participation in important decision-making.

Patricia Drapper notes how Zhū/twasi men came to the fore when the group became involved in extra group political, social and economic interaction, but she is unclear as to how the wimmin were 'eased out'.

How did men manage to exclude wimmin from working at a labour process that yields a social surplus? The result at least is apparent, wimmin now occupy a subordinate social position to men. The process becomes self-perpetuating as children are socialised or conditioned into sex-segregated work and roles. A dialectical movement has occurred as the work and social significance of childbearing and childcare has increased, and female participation in wider social activities and production has decreased.

The elaboration of reproduction into a distinct female task has been compounded by the development of shorter intervals between births. The introduction of supplemental foods (cows milk and grains) reduces the effect of lactation on ovulation thereby increasing the risk of earlier conception. There is also evidence that the decrease in mobility is a contributing factor to reducing the interval between births.³⁹ Wimmin now spend more time as childcare workers in private households. At the same time there is evidence that as male participation in the work has decreased they have taken on a new position of authority over children. Drapper has commented on the change in the parent-child relationship and in property relations.

Ranking of individuals in terms of prestige and differential wealth has begun in the settled villages. Men, more than women, are defined as the managers or owners of this property.

...Children are most identified as being the child of the father rather than the child of the mother. Goats are also referred to as belonging to one or another adult male, though in fact a given man's herd generally includes several animals which in fact belong to his wife or other female relatives. These expressions can be heard in the bush setting, for individual ownership exists among the foragers as well, but the 'owners' referred to are as likely to be women as men. At Mahope this linguistic custom is being replaced by one in which the adult male stands as the symbol of his domestic group. It is a linguistic shorthand, but I believe it signifies changes in the relative importance attached to each sex.⁴⁰

The major changes in wimmin's lives can be clearly defined.

- (1) A reduction both in absolute mobility, and in mobility relative to men.
- (2) Spatial separation of reproductive from productive work.
- (3) Transformation of communal childcare to individually performed work associated exclusively with wimmin and female children.
- (4) Loss of support system resulting from change from public visibility to private living and working space.
- (5) Exclusion from productive labour that yields a social surplus.
- (6) Transition from relations of inter-dependence to economic dependence on men.

It is impossible to specify precisely the transition from a foraging to agricultural/wage labour subsistence, to freeze the process at some point in time and say, "It happened then, that men increased their social power and subordinated wimmin to that power". To arrive at an understanding of the underlying causal mechanisms retroductive logic must be used. An empiricist reading of the situation

can at best only describe the forms it assumes, not explain it. At the level of appearances wimmin are too busy with domestic and childcare work to learn Bantu or run after cattle. It might be suggested that this suits them well enough, or even that only males really evolve, dragging wimmin behind them into the 'modern' world.

The males of the Zhū/twasi are now a privileged group. Wimmin cannot compete for better, more diverse and lucrative jobs. They are tied to childcare and domestic work which keeps them out of the running, more-or-less confined to one place, the household. Wimmin are now vulnerable to male aggression. The change from a public to private social existence has destroyed the protection formerly ensured by visibility through which wimmin could congregate together to protect themselves. Now that they are economically dependent on men, there is pressure on wimmin to submit to male wishes, in order to secure their material subsistence.

Two distinct social roles have developed: one is tied exclusively to the work of species reproduction and to domestic labour while the other has comparatively unlimited opportunities for job diversity, the accumulation of wealth and for organizing the social and political structure of the group.

The social constraints placed on wimmin on the pretext of the unique demands of childbearing and childcare work, have assumed vastly different forms. Before concluding the anthropological discussion I briefly look at a patriarchy in Western Uganda that has developed a unique set of processes for subordinating wimmin.

(6) Immobilizing Wimmin: Hima Patriarchy

The Hima of the eastern Ankole district in western Uganda are pastoralists who rely almost exclusively on milk, meat and dairy products. Adult wimmin are excluded from most herding and dairying tasks, and their productive work is limited to food processing and domestic labour. The wimmin neither own, nor have legal rights to cattle, which are the major source of subsistence and the form^{of} social surplus. Consequently wimmin are economically dependent on men.

The social institutions militate against political co-operation and solidarity amongst wimmin. They are married early, whereupon they enter the household of their husbands' kin, and this separates them from their own kin and friends. Freedom of movement is severely restricted after marriage, for example, a wimin must obtain the permission of her husband to leave the camp.⁴¹

Polygamy further divides wimmin, as female interaction is shaped by economic dependency and rivalry. They are thus constantly pitted against one another. A wimin living in the house of her husband's parents is obligated to be sexually 'available' to her father-in-law. The sexual exchange of wimmin is systematically used to consolidate male solidarity and wimmin are compelled to submit to sex, to rape, with the men approved by their husbands.⁴² The exchange of wimmin is a patriarchal means of stabilizing social, political and economic ties among men.

The Hima female social role is confined to and by childbearing and childrearing. Despite continual fluctuations in the size and membership of Hima households, often

resulting in a chronic labour shortage, wimmin are excluded from herding and dairying work. Unmarried females are permitted to help, but they are pushed out upon marriage. Primary emphasis on the female social role is placed on fertility. The most unique feature of Hima patriarchy is the relationship between the social construction of reproduction, the dominating view of female sexuality, and the means of subsistence. The male appropriation of the surplus (cattle) empowers them to control female fertility and labour, and to impose a form of sexual domination that is integrally related to the social surplus.

Female aestheticism is measured in weight, preferably by obesity, which is attained by consuming large quantities of cow's milk. Slim active wimmin are seen as sexually unattractive. When a woman is to be married she must undergo an enforced period of seclusion and idleness where she is fattened on cow's milk. The period of confinement originally lasted one year but it has now been reduced to two months. Wives are kept fat by consuming milk surpluses, by force if necessary.

Female obesity is an index of male wealth. As wimmin are literally immobilised, they are transformed into objects of conspicuous consumption.⁴³ There are complex laws surrounding female reproduction and cattle, linking fertility and procreation to the welfare of the cattle. Hima patriarchal law forbids wimmin from drinking cow's milk for a minimum of four days during menstruation. Violation of this law reputedly threatens the group's survival by undermining the ability of cows to lactate and reproduce. Menstruation is socially and ideologically related to the

well-being of cows which are the source of subsistence and the form of male wealth and privilege. A pregnant woman is expected to drink the milk from a cow that has recently calved. If she refuses she is forced to do so, generally by her father-in-law.

Bulls are symbolically associated with the procreative functions of men, who attempt to control female fertility and childbirth. Men have the right to stop women breast-feeding so that they will conceive more rapidly.

Hima women are not simply pawns in a political system dominated by male interest. They do exert a certain amount of control over their own lives, mainly through subtle forms of resistance and subterfuge. The forms of male domination may appear to be unique, but the underlying social relations are not. Men are the privileged class, who control the means of wealth and the distribution of the social surplus. They control their own lives, as well as those of women, and they enjoy a diversity of experiences from which women are excluded. The expression of female sexuality is directly related to the male appropriation of the social surplus. To survive materially a woman must marry. To be sexually attractive to men she must be fat, she must consume the social surplus controlled by them. Once married and economically dependent, she must submit sexually to the men chosen by her husband, to further his economic and political interests. In Hima patriarchy, male control of the social surplus enables men^{to have} extraordinary control over women's reproductive and productive labour.

6. Forms of Restraint

The attempt to document the range of processes and institutions through which wimmin are subordinated to men would be a massive and endless project. Endless because patriarchy is never a static system of power, one form of domination gives rise to another.

Similarly the forms of resistance developed by wimmin have been equally diverse, not only to resist but actively to fight male control over their labour, fertility, sexuality and self-expression.

In some societies the methods of controlling wimmin are easily observed, and in these patriarchies male rule tends to be direct and brutal. In China, the males of the most leisured class devised a particularly effective and brutal form of control; they crippled the feet of female children, perhaps the most absolute method of ensuring female dependence that patriarchy has thrown up.⁴⁴ In other societies, mostly in Africa and in the middle east, the practice of mutilating the genitals of young females effects yet another form of dependence, another type of submission.⁴⁵ Male observers of such forms of male domination merely "see" examples of cultural or religious ritual. They observe wimmin performing the mutilations or policing the seclusion and they conclude that wimmin play an active role. Seeing only sexual fetishism and not political tyranny, they contribute to and conspire in the erasure of male responsibility.

In other societies, notably white dominated capitalist societies patriarchy is maintained through far less visible and brutal methods. At least the violence is concealed.

In patriarchies such as our own, male domination is softened by paternalism, shrouded in the liberal rhetoric of equal opportunities, equal pay, self-assertion: wimmin own drivers' licenses, and they are entitled to orgasms, if at times they are coerced into simulating.

Despite real improvements in their lives wimmin do not compete on an equal footing with men. At the most fundamental level, from the Hima pastoralists to capitalist patriarchy, men have become a privileged class through exploiting and manipulating the social activity of childbearing. In the presence of a distinct male political interest, the work of pregnancy has had social implications which have been used against wimmin to exclude them from certain activities and work processes. The relative decrease in female mobility associated with pregnancy can be used by men to gain a marginal advantage over wimmin, to restrict their participation in social production and exclude them from an equal share of the social surplus. This enables men to acquire control over wimmin by making them economically dependent. Particularly when the economic dependency is experienced in a private family form there are strong social forces preventing wimmin from organizing politically to fight male domination. Under these conditions there are likely to be few restraints on the use of force by males to strengthen their position of dominance.⁴⁶

The most significant political point to be made concerning pregnancy is that it is not a disability. Wimmin are not the workers at the bottom of the production ladder because they get pregnant, although that is how it is made to appear. It is only in a particular social context that pregnancy is used, by men as the basis for establishing an

edge over wimmin. Similarly, men do not use violence against wimmin because they are physically stronger, innately more aggressive, or because they have access to weapons. Male violence is systemic because of a social context in which wimmin are politically weaker than men, where they are not organized effectively to prevent it and where they have little real choice but to submit to men's demands.

I have not included concrete detail drawn from the experiences of the wimmin I interviewed precisely because of the point I am trying to make. The stage in the reproductive process where wimmin experience the greatest social and economic disadvantage is not pregnancy, but childcare. At this stage men are off in the workforce, benefiting from uninterrupted service, going for promotion, moving places, attending night meetings, working weekends, and so on. They are mobile, unimpeded by childcare, and in comparison to wimmin they are free to pursue their interests and to organize to protect those interests. Wimmin are not tied down by pregnancy but by their exclusive association with childcare work and the conditions in which they are compelled to carry out this work. It is this which prevents them from competing equally with men, not the fact that they are in possession of certain reproductive organs.

The social context in which pregnancy is transformed into a political disability establishes the social relations of male dominance and female submission which are carried over to the other stages of reproduction. Pregnancy is the only stage where males can gain a marginal advantage over wimmin, and this is used as the basis for the social

construction of a female role that systematically marginalises wimmin, that forces them to acquiesce to male demands because they are politically and economically weaker than men.

The wimmin I interviewed made few references to pregnancy apart from general comments concerning health, doctors, the growth of the foetus, advice given, expectations, etc. Whether the woman had wanted the pregnancy belongs to the discussion of fertility control and conception. Pregnancy was not referred to or experienced as debilitating (except for Nola who developed a heart condition). However the ramifications in terms of opportunities and constraints following the pregnancy were debilitating, economically and socially. The power of men to escape childcare labour, to use force against wimmin with virtual impunity and to secure economic independence is the political power to dominate wimmin.

In the next chapter I examine the effects of the social relations established on the basis of the female social activity of pregnancy and the non-activity of males, carried over to another moment. Rather than analyse birth, which is the observed and actual stage that follows pregnancy, I examine the moment of conception. Since according to my hypothesis, male social power is weaker at the moment of birth than conception. This involves the relations of male domination of sexuality and patriarchal control of fertility.

FOOTNOTES

1. Not all feminists who deny the importance of biology take a reformist line on social change, for example, marxist feminists.
2. Sharon Tiffany, Women, Work and Motherhood: The Power of Female Sexuality in the Workplace (New Jersey: Prentice-Hall, Inc., 1982), pp.94-95.
3. E.O. Wilson, Sociobiology: The New Synthesis (Cambridge, Mass.: Harvard University Press, 1975) p.586.
4. W.D. Hamilton, "The Genetical Evolution of Social Behaviour", Journal of Theoretical Biology, 7 (1964), pp.1-52.
5. Marshall Sahlins, The Use and Abuse of Biology: An Anthropological Critique of Sociobiology (London: Tavistock Publications Ltd., 1977) p.22.
6. R.L. Trivers, "Parental Investment and Sexual Selection". Sexual Selection and the Descent of Man, 1871-1971 (Chicago: Aldine, 1972).
7. Trivers, p.144.
8. Trivers, p.145.
9. Martin Barker, The New Racism (London: Junction Books, 1981), p.124.
10. Barker, p.128.
11. Barker, pp.128-131.
12. E.O. Wilson, p.4.
13. Janet Sayers, Biological Politics - Feminist and Anti-Feminist Perspectives (London: Tavistock Publications Ltd., 1982), p.65.
14. Cited in Sayers, p.65.
15. Sahlins, p.7.
16. Sahlins, p.9.
17. F. Engels, "Engels to P.L. Lavrov, No.12-17", Selected Works, Vol.3, p.478.
18. Sayers, p.58.
19. M. Daly and M. Wilson, "Sex and Strategy". New Scientist, 81, p.17.
20. Barker, p.97.
21. Sahlins, p.36.

22. Sally Slocum, "Woman the Gatherer: Male Bias in Anthropology ", Toward an Anthropology of Women, pp.39-41
23. Slocum, p.48.
24. G. Murdock, "Ethnographic Atlas: A Summary ", Ethnology, 6, no.2 (1967).
25. S. Washburn and C. Lancaster, "The Evolution of Hunting ", Man the Hunter, eds. R. Lee and I. DeVore (Chicago: Aldine, 1968), p.303.
26. Jane Kephart, cited in Sally Slocum, "Woman the Gatherer ", p.49.
27. Slocum, p.46.
28. Kathleen Gough, "The Origin of the Family ", Toward an Anthropology of Women, pp.70-71.
29. Paula Webster, "Matriarchy: A Vision of Power ", Toward an Anthropology of Women, p.149.
30. R. Rohrlich-Leavitt, et al., "Aboriginal Women: Male and Female Anthropological Perspectives ", Toward An Anthropology of Women, p.115.
31. Tiffany, p.15.
32. Tiffany, p.19.
33. Patricia Drapper, "!Kung Women: Foraging and Sedentary Contexts ", Toward an Anthropology of Women, p.82, and Tiffany, p.19.
34. Tiffany, p.20.
35. Drapper, p.85.
36. Tiffany, p.33.
37. Drapper, p.101.
38. Drapper, p.96.
39. Tiffany, p.33.
40. Drapper, p.108.
41. Tiffany, p.76.
42. Tiffany, p.83.
43. Tiffany, pp.81-82.
44. Mary Daly, Gyn/Ecology: The Metaethics of Radical Feminism (London: The Women's Press Ltd, 1979), pp.134-152.
45. Daly, pp.154-177.

46. Violence is estimated to be a routine feature of male/female relationships in capitalist patriarchy. The following statistics are cited in the New Zealand Police Extension Studies Unit, No.6, "Conflict Situations." The figures are drawn from an American study by R.J. Gelles, "The Violent Home: A Study of Physical Aggression Between Husbands and Wives," California: Sage Publications, 1974.

Over 50% - families experience conjugal violence
26% - experience regular violence
47% - husbands hit their wives at least once
25% - hit their wives from 6 times a year up to daily.

In 1982, Women's Refuges in this country sheltered some 1300 wimmin. John Church, Violence Against Wives: its Causes and Effects (Christchurch: John Church, 1984), p.6.

CHAPTER THREE

THE SOCIAL RELATIONS OF CONCEPTION

1. Introduction

There are two political aspects of the 'moment' of conception which must be unearthed: the social relations of heterosexual sexual intercourse and the control of female fertility. They are not unrelated although they may appear to belong to quite different areas of wimmin's lives.

The first aspect is the male use of force against wimmin. I analyse this at the moment of conception because sexual intercourse always occurs within the unequal power relationship, and forced sex is a manifestation of male power. Rape is a form of violence but the underlying cause has nothing to do with sex, the essence is power. Even though violence assumes many different forms, rape, beatings, psychological coercion, the essence is always the same.

The ideology of rape presents the form as the essence. By this I mean that the ideology makes it appear as if rape is really about sexuality, that men have innate uncontrollable sexual urges which sometimes are unleashed on wimmin. According to the ideology, men who do not rape are those who have chosen to restrain their sexual activity. But rape is not about individual men who decide whether or not to curb their 'natural' urges. Rape is not 'natural', it is a manifestation of fundamentally unequal power relationships between men and wimmin.

Wimmin are not dominated because ~~men~~ rape, men can only get away with raping because they already have power over wimmin. And because of this power, wimmin are forced to submit, not only sexually but to a whole range of demands. They are forced to give in, not because they are physically weaker, but because they are economically, politically and socially less powerful than men. The unequal relationship sets the limits within which heterosexual intercourse takes place, generating the tendency for sex to assume some form of compulsion.

Rather than attempt to account for the many different types of violence, the only one I examine apart from rape is language. Unlike rape, language is neither physical or visible but it too embodies the power relations of gender. Language is another form of violence which shows that the use of force extends to all aspects of social exchange.

The second aspect of patriarchal reproduction I examine is actual conception. Wimmin spend most of their lives attempting to prevent themselves from conceiving, or to control when they conceive. But wimmin do not control the means of contraception, men do, or rather patriarchal organizations such as the medical institution do. It is very difficult for wimmin to resist being drawn in to the social role of childcare worker because the inability to control fertility has the effect of tying together female sexuality, procreation and the social form of parenting. When I examine childcare, at an even more concrete level of abstraction, I attempt to show that there is no 'right' moment to conceive for a woman in patriarchal society. This is because the forces that determine the division of labour and therefore

of gender privilege are already in operation. However, the struggle to control if and when to conceive is vital to wimmin's self-determination. Sexuality and reproduction must be separated to overthrow patriarchy.

I examine male control of the means of contraception and look at wimmin's experiences of birth control methods. This requires accounting for capitalist production of the means of contraception and it takes the argument to an increasingly concrete and less abstract level of analysis. I have chosen only one method of contraception to examine in detail, the killer injectable drug, Depo Provera. A thorough investigation of birth control methods is impractical for my purposes.

In the previous chapter I argued that the relations of dominance and submission are established at the most fundamental moment of gestation and are carried over to other stages in reproduction. To briefly summarize, while wimmin are engaged in the activity of pregnancy, men, who are free of this activity, are better placed to organize the world in their interests. This potential advantage can be exploited in a situation where the conditions exist that will enable one group of people to escape some of the socially necessary work by offloading it onto another. These conditions are found to exist in the form of a social surplus. Any type of social surplus, i.e. cattle, grain, commodities, is sufficient to allow for the possibility of a group of people acquiring privileges and comparative leisure by appropriating the surplus. Capitalist profit is only one among many forms of surplus.

I analyse conception on the assumption that a social surplus exists and that a group of males have taken control

of that surplus. While not all men have access to that surplus they all benefit from patriarchal domination. The position of males as a privileged class over wimmin extends from gestation to conception. In reality the combined effect of the total social relations is responsible for male power but in this chapter I examine only the political aspects of the moment of conception.

2. Sexual Power Relations

The Oxford dictionary lists among its definitions of violence "unlawful exercise of physical force". When the scientific (rather than the juridicial) meaning of law is applied, male violence can be explained as a law of patriarchal reproduction. The tendency toward some form of compulsion to characterize male female relations is produced, at the most fundamental level, by the relations of gestation. It is here that men gain an edge over wimmin but the use of force extends elsewhere. And the moment at which the antagonism is most extreme is sexual intercourse.

The power to coerce involves more than physical abuse. It is the capacity to get people to do something which is not in their interests, not just once, but throughout a lifetime. The power to coerce is not just manifest in physical violence, since coercion characterizes the total interplay of people involved in a fundamentally unequal power relationship. There are two sides to the relationship, the power to get away with using force, and the powerlessness to prevent it from happening.

An essential aspect of patriarchal relations in capitalist society is that female submission to male

domination assumes the social form of "consent". As Eisenstein comments, "...there is no specific law that says women will rear children, do laundry or be cooks".¹ Unlike slavery or feudal society, wimmin are not legally compelled to submit to male demands. Wimmin are not formally required to bear children or enter into exclusive relationships with men. And yet such laws exist, unseen and unwritten laws that shape and determine wimmin's lives.

At the visible social level wimmin consent to marry, to have children, to raise them and to accept part time, poorly paid jobs in the labour market to fit in with their childcare responsibilities. At the hidden level, they do not in fact consent to any of these things. They submit under the pressure of social forces they cannot see but certainly do feel, and this is transformed into "consent". Rape epitomizes this contradiction. The patriarchal belief that wimmin "consent" to rape indicates the real power relations involved: that wimmin submit to rape and many other forms of coercion because they have no choice.

Rape is a form of violence, it involves a sexual attack but its causes have nothing to do with sex. The real relations involved are not sexual, but political. The attempt to analyse male use of force at the moment of conception is complex and difficult. I find it very traumatic to write about. It becomes more complex when I examine the sexual objectification of wimmin because it always appears as if the issue is 'sexuality'. This has the effect of depoliticising the relations and making it appear as if innate sexual differences are the real basis. Rape is often presented as a matter of male sexual urges and female attractiveness

and receptivity. This totally obscures the power relations.

What I attempt to explain, in tackling the myth of rapists as sexual deviants, is that the power relations between wimmin and men generate social forces which act on all people. Individual men may 'decide' not to rape wimmin, but it is not a matter of individual men who become rapists. The possibility of rape resides within the unequal power relations themselves. A man can more or less do what he likes to a womin, within certain constraints, if he is in an exclusive relationship with her. He can get away with it because their relationship is fundamentally unequal and because he has the back-up of an entire social system predicted upon that power.

Most of the methods by which wimmin are compelled to submit to male demands are unobservable and they do not leave physical injuries. The use of physical violence is unnecessary for forcing wimmin to work as childcarers, as domestic workers, and in menial, low paid productive labour. Men can escape socially necessary work by dumping that work onto wimmin without having to raise a fist. Physical violence itself is never the cause of male domination, but because of the unequal power between wimmin and men, the possibility of men using force, or its threatened use, is a constant and integral part of that relationship.

The most important question is, how can men get away with it, with using force in the form of sex? Analysing the moment of conception alone cannot yield an answer because it is the total social relations of reproduction that result in this vulnerability. In capitalist patriarchy, the

particular conditions are the product of a number of forces which combine to effect the economic, and socio-political dependency of wimmin on men. This will become increasingly clear as the argument becomes more concrete.

Rather than attempt to account for the enormous range of coercive methods employed by men against wimmin, I focus only on rape, as the most explicit form, and the use of language, as the least explicit. To illustrate the power relations of rape I examine the patriarchal construction of sexuality.

3. The Objectification of Wimmin

Sexual objectification is one of the processes and real practices maintaining the subordination of wimmin. Sexual intercourse is ideologically represented and frequently experienced as something "done to" wimmin. The language of 'love' expresses the force used by men. Wimmin are "screwed", "fucked", "made love to", "laid", and so on. Catharine Mackinnon has formulated the objectification of wimmin as "man fucks woman; subject verb object".²

One of the means by which male power over wimmin in sexual intercourse is ideologically transmitted is through the education system. Children are taught about 'sex' in the form of learning about the "facts of life", in reproductive terms. While it appears to be about reproductive biology it is actually teaching female and male children their differential social roles.

Sex is always equated with heterosexual intercourse and defined in male terms, as the act of coition. Stevi Jackson comments that while male children cannot help but

notice that their penis is their chief sexual organ:

...amid all the information about penises and vaginas, eggs and sperm, or in the more vague notion of 'where babies come from', it is unlikely that girls will even hear the clitoris mentioned, let alone learn of its function.³

Terms such as 'penetration' and 'insertion' of the penis into the vagina express male activity and female passivity.

In her interview with teenage girls, Jackson was struck by the way in which they discussed sex, in terms of what was done to them. She says they talked of themselves as passive objects, or in terms of what they would "let the boys do to them".⁴ They also referred to sex as something they 'gave' in exchange for something else.

Wimmin are taught to see themselves through male eyes and thus become accomplices in intimate and powerful contradictions. We are taught to desire ourselves on the screen and in glossy magazines. Simultaneously we are forced to despise ourselves for failing to measure up to the unobtainable goal of male defined femininity. But the ideal is not uniformly unobtainable. Some wimmin are automatically exempt from the competition because the patriarchal aesthetic ideal is also the product of white racism and the class system. The stereotypical beauty with blonde hair and fair complexion is an added insult to black wimmin.

Sheila Rowbotham gives a powerful account of her personal discovery of sexual objectification, of how we are trained to see ourselves through male eyes. She describes watching a Beatles movie, "Magical Mystery Tour". At one point a group of people go in to watch a strip tease show. Rowbotham felt herself "sliced in two".

*I had caught myself going to watch another woman as if I were a man. I was experiencing the situation of another woman stripping through men's eyes. I was being asked to desire myself by a film made by men. Catching myself observing myself desiring one of my selves I remained poised for an instant in two halves.*⁵

Wimmin are socialised to identify themselves sexually as beings who exist for men, and a major component of patriarchal sexuality is the virgin/whore dichotomy. Annabel Faraday argues that this contradiction is central to pornography, not only 'hard' pornography but the 'soft' pornography of television, advertising and magazines.⁶ A major component of this dichotomy is detachment from sexuality, the obliteration of female sexual desire and activity. And associated with this is the tendency to equate masculinity with adulthood and femininity with childlikeness.

In an American clinical study on mental health it was found that the depiction of the 'normal healthy adult' was almost identical to that of the 'normal healthy man'.⁷ The characteristics used to describe the 'normal healthy woman' were those associated with children. According to this view, to be 'healthy', a woman should be dependent, emotional, vulnerable and childlike.

Rosalind Coward argues that the most striking aspect of the contemporary objectification of wimmin is that the ideal body shape is a version of the immature body.⁸ For example, the practice of shaving under the arms and shaving legs removes the very evidence of puberty and female adulthood. Hairs are considered unsightly and ugly on wimmin, masculine on men. Coward claims that it is no coincidence that this sexual ideal is an image which connotes powerlessness. It is also a statement of self-denial, the detachment from sexuality which relates to the equation of femaleness

with childlike dependency. Just as children are in need of adults, that is, male protection, so too are wimmin.

Consciousness of having the "right" body shape dominates wimmin's self-definition and sense of worth.⁹ This is not because wimmin are the victims of false advertising, but because that is how the concrete world works. The obsession with weight is a patriarchal disorder, and the other side of the "fear of fat" is self-starvation, anorexia nervosa. Both compulsive eating and anorexia are ways of obliterating 'feminine curves'.

Anorexia has been classified by the medical experts as a "functional disorder", meaning that no structural or organic change has been found to precipitate it.¹⁰ One of the prevailing opinions is that it is a way to remain physically a child. Vicki Druss and May Sue Henefin claim that some wimmin so dislike being regarded "first and foremost, as sexual creatures that they prefer to regain a child-like shape". They draw a connection between anorexia and child abuse, citing one study which found that 23% of the wimmin had been subjected to sexual violence by their fathers.¹¹ One of the studies was carried out by a Doctor who had noted the high incidence of child abuse, but finding the parents and child reluctant to discuss it, decided not to pursue it further.

The connection between feminine dependency and children in patriarchal sexuality is unmistakable. The ideology is grounded in the material power relations that determine the expression and activity of heterosexual relationships. Shulamith Firestone argues that the romantic idealization of love is a necessary process for enabling men to "fall in love"

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Don't panic Folks, she's only the office girl. Meet David and Jackie Lundt who have opened their own Automotive repair workshop in Saltash St, (off Carrington Rd) New Plymouth, on July 2nd

David was born in New Plymouth, served his time and received his A Grade Certificate while working with his father John Lundt at Merriland Motors, and is therefore used to all aspects of Automotive repairs.

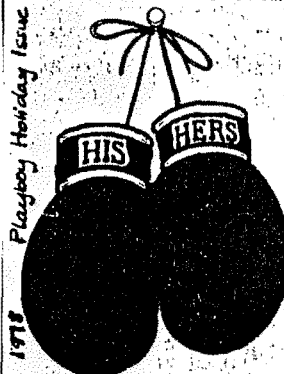
Jackie, she won't be touching the cars! At 3½ months pregnant, will be confined to the office.

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BEATING SENSE INTO WIVES

CONCORD, NEW HAMPSHIRE—The New Hampshire Commission on the Status of Women has decided that the women's liberation movement is at least partly to blame for such social problems as wife beating and child abuse. Commissioner Gloria Belzil said that some beatings probably occur because "those women libbers invited the hell out of



their husbands." Another, Frances Drown, added, "The major theme of the feminist movement is do your own thing. That's why it might be a seed to child abuse and other things." The commission's members, appointed by arch-conservative New Hampshire Governor Meldrim Thomson, also warned that any program to help battered wives by providing them with shelter would be an "invasion of privacy."

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Source: These advertisements were sent to the Broadsheet "Hogwash" pages.

with wimmin.¹² She says that the process acts to "artificially equalize the two parties". Idealizing, mystifying and glorifying wimmin, according to Firestone, are necessary to render the womin's sex class inferiority void, so that men can justify their descent to a "lower caste". By virtue of her association with a man, a womin can be elevated above the common herd of wominhood. This also functions to separate wimmin, as they have a vested interest in 'not being like all the rest'. While this artificial and temporary ideological process to equalize the unequal parties is never absolute or wholly successful, it is a tendency generated by the patriarchal social relations. However, in many cases there is no attempt to disguise the power relations, even temporarily.

The sexual objectification of wimmin justifies male domination over wimmin in sexual intercourse, by idealizing male 'activity' and coercion, and female passivity and submission. Because of the real relations underlying sexual intercourse, it is often difficult to distinguish sexual harrassment from 'normal' encounters with men. It is this understanding which informs the feminist slogan, "Rape - at the end of every wolf-whistle". It is the understanding that regardless of individual men's intentions, the possibility of using force against wimmin resides within the unequal power relation. I now look closer at rape as a form of coercion.

(1) Rape

The sexual objectification of wimmin incorporates the ideology of rape. I have listed some of the false beliefs.

- Rape is impossible.
- Wimmin want to be raped or secretly fantasize about being raped.
- Wimmin who have been raped have provoked it or in other ways "asked for it".
- A woman who has really been raped will have physically resisted, screamed, tried to escape, and will have some physical injuries.
- A woman who has been raped will tell someone about it at the first available opportunity and will usually report it promptly to the police.
- Rape is caused by lust or sexual frustration.
- Rapists are psychopaths.
- Rapists are generally unknown to the wimmin.¹³

Rape mythology centres on three major beliefs: that rapists are "nutters" or sexual deviants; that they are unknown to the wimmin and are therefore isolated attacks; and that in some way wimmin cause men to rape. The reality of rape is totally at odds with the mythology. The following data were gathered by the National Organization of Women and printed in the New Zealand Women's Weekly in 1977.¹⁴

Contrary to the myth that most rapes are committed in deserted streets on wimmin on their own: 25% of the wimmin were raped in their own homes and 25% were raped in the home of the assailant. Only 4% of wimmin were raped in the street and in 26% of the rapes there were other people present at the time.

Contrary to the myth that rapists are psychopaths, unknown to the wimmin, and are 'frustrated', single, black and working class males: the 'typical' rapist is in his twenties, white (93%) and married (41%). Occupations cross class divisions. The media consistently uses rape in a racist manner. Furthermore, the social power of those white middle class men who are unable to prevent a case going to court, affords them the best lawyers and suppression of their names. Neither males nor females uniformly experience

the privilege and the oppression of patriarchy.

Contrary to the myth that wimmin will get redress through the legal system: of the rapes which are reported to the police, 45% are cleared as "no offence disclosed". The only other offences which show a higher proportion of complaints dismissed by the police in 1981 were incest (56%), abduction (53%), and one or two other "miscellaneous" offences, such as libel.¹⁵ In the NOW survey, only 18.5% of actual rapes were reported to the police. The report prepared by Department of Justice and the Institute of Criminology estimates a similar figure, that only one in five rapes are reported.¹⁶

The power relations are concealed by the ideological belief that rape is the result of uncontrollable sexual urges. Elsa, one of the wimmin I interviewed, was compelled to have sex by her partner. He used the ideology of 'sexual needs' to justify using force.

Elsa: ...one of the things he liked about being married was having a wife around who he could regularly screw when he felt like it. He used to say he had to have sex regularly to feel healthy and happy...I remember feeling I had to have sex with him...feeling pain.

The belief that rape is an immutable feature of the biological make-up of males finds expression in a variety of places. For example, Susan Brownmiller reduces rape to biological sex differences

By anatomical fiat - the inescapable construction of their male organs - the male was a predator and the human female served as his prey.¹⁷

Rape has nothing to do with biological differences, or 'natural' urges. It has everything to do with power. Carol was raped constantly throughout her marriage.

Carol: If I didn't he'd come and I'd be in the middle of the dishes and he'd have his way. If I wouldn't he'd slam me up against the sink and we'd end up against the wall. I felt so dirty. If he asked me and I didn't give it he'd sulk for a week - wouldn't even speak to me, which I couldn't take. I'm not that sort of person. Or he'd say, right, then, when you want it you're not going to have it, see how you like it. Or he'd threaten me with other wimmin. The majority of the time it wasn't rape so much as emotional blackmail. I couldn't deal with it. I couldn't deal with him pushing me or sulking - so I'd just leave, switch off, and it was nothing - I'd read a book. I never enjoyed sex with him. And then of course there was something wrong with ME! I didn't have 'sex drive'. And then he used to go on, about...my breasts. He used to say, you know, I wish I'd met you when you were young and firm, and, you know, not like you are now, old and wrinkled...I've got a real complex about that. I mean that's, if you call that making love, I was doing that. I used to think MY GOD.

In the Christchurch study of male violence conducted by Doris and John Church, it was found that for 72% of the wimmin they surveyed, rape was part of the violence.¹⁸

The wimmin who were raped regularly, once a week, or once or more times a day, were forced to leave what they were doing, attending to children, preparing meals, or talking to visitors, and were then raped.

Carol: While I was doing the dishes - with two kiddies running around - right there and then.

John Church comments that if the wimmin were slow in complying, or attempted to resist, that the "chances were high that they would be assaulted as well as being raped".¹⁷ It is false to make this distinction between rape and assault. By doing so the underlying social relations are obscured. It is essential that rape is not portrayed as a sexual offence but as an exercise of power, of domination. Although the form of domination is sexual aggression, the cause is not sex but power. The division of labour in households where

open force is used, confirms that rape is only one of many forms of violence.

The Christchurch study revealed that the onset of physical abuse occurred at the same time as the male began to impose "unreasonable demands". In the majority of cases this occurred within twelve months of living together. When asked to give examples of "unreasonable demands", the wimmin responded as follows.

- Not being allowed to disagree or to express any opinion of my own. (36 wimmin)
- Having to do everything around the house with no help. (25 wimmin)
- Having to have sex whether I wanted to or not. (25 wimmin)
- Not being allowed to see friends or family. (20 wimmin)
- Having to go out to work as well as doing everything around the house. (16 wimmin)
- Not allowed any say on the way money is spent. (14 wimmin) 20

That the essential relation is not sexual but social power is clearly shown by the types of things men compel wimmin to do: to take on most, if not all of the childcare work; to perform most, if not all of the domestic tasks, to work as a slave or serf, attending to the male's every needs; and to work in productive labour as well, still with no assistance. The force used against wimmin, where the form is sex, cannot be distinguished from other cases of violence, where even though the form is different, the underlying cause is the same. However, physical abuse is unnecessary for subordinating and controlling another person's behaviour, often the threatened use of violence is sufficient.

Anita: The guy I lived with before (M) ['M' refers to the male partner], it took me about two years to leave him...I was scared of him.

Wimmin can be scared of their partners, irrespective of whether physical violence has been used against them.

Belinda: have you ever been in a relationship where you've been frightened?

Brenda: No. Ohh, no, not...(M)'s sort ofhe doesn't drink much, but he used to. I was a wee bit scared of him, he did drink a bit. I was sort of frightened a bit...at times he couldn't help himself, just sort of, lost his temper, but he never hit me or anything like that, he just wouldn't dare, because I wouldn't have that. He never beat me up or anything like that.

The dominating form of male violence is sexual abuse which is why I analyse the use of force at the moment of conception. The cause of violence has nothing to do with sexual intercourse but it is here that wimmin are subjected to the most vicious and damaging assaults. Men have economic, political and social power over wimmin and it is this which enables them to get away with raping and beating wimmin. To show that the unequal power relations extend throughout male/female social exchange, I move from the most explicit form of violence to the least explicit, language. Language is a social form that embodies the dominant social relations.

(2) The Power Relations within Language

The power of language to humiliate, undermine, ridicule, and control people is clear, but the essence of violence within the use of language is not always so apparent. The violence implicit in language is a very effective method of intimidation. The man Eve was married to physically abused her but most of the violence was psychological.

Eve: ...there was a very violence episode when I was four months gone. I got quite badly knocked around. He'd get (verbally violent), and kept charging in and out of the bedroom, slamming the door and screaming and yelling and getting himself worked up into a tither, until I was so bloody terrified I grabbed the baby and ran to the neighbours.

Some of the wimmin I interviewed spoke of the frustration they felt at having their attempts to express themselves trivialized, ignored or forcibly stopped.

Carol: ...when we argued he had a bad habit of grabbing me and I couldn't stand it. I couldn't argue face to face. He had to grab me and pin me down and I used to get really anti. And then I used to be balling. I'd just about be hysterical, to be pinned down. A few times in an argument he'd hit me.

Dale Spender argues that males and females do not stand in the same relationship to language. Language is the life expression of a society and as such, embodies the social relations that predominate in the course of its making.

Spender argues that the concept of wimmin's talk, or 'prattle', is flatly contradicted by concrete reality. There has not been one study providing evidence that wimmin talk more than men. However there have been numerous studies indicating that men talk more than wimmin.²¹ Men exercise control over wimmin's language and conversation, they interrupt more, they define the meanings of words and concepts and the priorities for discussion. Men, according to Spender:

*...deny equal status to women as conversational partners with respect to rights to full utilization of their turns and support for the development of their topics.*²²

Spender cites an American survey which found that 98% of the interruptions in conversations were made by men.²³ Interruption is a mechanism by which men can 'gain the floor' and dominate the conversation. It is also a mechanism that enables them to engineer the 'silence' of wimmin.

Dorothy: He'd just tell me what he was doing and ah, if I disagree, ah, he'd just give me - I always refer to it as his "8 Reasons" of why I should do it...He's not a wife basher, physically, um, but he's a verbal...When things don't go his way he, um, how do you put it? I can get myself into such a tangle because of the way he puts things and says things. And I could never, I could never win talking to him.

Dorothy went to see a counsellor after (M) became seriously ill. She wanted to go alone.

Dorothy: It sort of got into the fact that the marriage was a bit shaky as well, so she wanted to bring him in. And I didn't want him to, cos he'd come in and take over and I wouldn't say anything. And he did come in, and he did take over and it makes it very hard. I don't know if I'm scared of him or what, but I just clam up. I don't know what it is.

The power to dominate conversations also involves the power to compel wimmin to be the verbal workers.

In patriarchal society, socially necessary work is dumped onto wimmin, from feeding children, to cleaning toilet bowls, to keeping conversations going. Wimmin are the workers in language, they perform the invisible but necessary task of maintaining conversations, easing uncomfortable silences, appeasing disgruntled participants, and so on.

A common belief is that wimmin are more polite than men. Spender comments that this is not a surprising phenomenon considering that in an unequal power relation, subordinates are expected and compelled to be polite to those in authority.²⁴ Privileged people demand both civility and servility from those less powerful than themselves.

The unequal power relationship obtains between males and females. Men know they can get away with imposing

demands on wimmin, whether it is through the use of language or through other means of coercion. They are not threatened by wimmin. However, they are threatened by other men. Carol's experience with her husband, after they had been separated, illustrates this point.

Carol: He didn't see Susan for a year and then he just came round this day, came to the door and said "I want to see Susan". I said "No, you could have rung first and checked if it was alright." And he just pushed past me and threw me up against the wall and went to hit me. And my sister stepped in and a girlfriend who was here, she went out the back with my daughter who was screaming by this stage. She didn't know what was going on, she was in a tizz. So I asked him to leave and he wouldn't so I rang the police and they wouldn't do anything. They said they wouldn't come out, it was just a domestic. So I had a good friend and I rang him, and he left.

Carol's husband was not threatened by 3 wimmin, he backed off only when another male became involved. To the police it was just another "domestic". They are loath to 'interfere' in the exercise of individual patriarchal power.

I have examined the control of violence and its threatened use at the moment of conception because sexual intercourse in patriarchal society always occurs within the unequal power relationship. Men do not dominate wimmin because they can rape and beat them up, they can only use force and get away with raping and beating because they already have power over wimmin. Once this relationship has been established on a society wide level, the capacity to use coercion is carried over to other moments in the social process. I have used language to show that the social relations pervade every exchange between the unequal parties.

At this moment, or through this particular 'window' onto reproduction, it is impossible to deduce the conditions

of vulnerability which force wimmin to give in to coercion. These conditions are material, they are not produced by biological differences, nor do they result from the ideas people entertain about their lives. Wimmin give in to both overt and subtle pressure because they are weaker than men, not physically, but politically, socially and economically weaker.

The other essential relation at the moment of conception is the antagonism over the control of fertility. Male domination of conception effects the interrelatedness of the power relations of sexual intercourse and of wimmin's vulnerability to conceiving. The combined effect of the two aspects, coercion and male control of the means of contraception, make it extremely difficult for wimmin to escape childcare labour. They are drawn in to the social role of parenting.

4. Patriarchal Roulette: "Falling In"

The knowledge, skill and technology exists to enable all wimmin to exercise control over if and when to conceive. But no technology is politically neutral and nowhere is this more apparent than the situation in which wimmin become pregnant. At this moment, the forces of production and reproduction are so advanced that 'we' have a bomb capable of levelling people and leaving buildings standing, and the means of artificially reproducing the human species. But wimmin do not have control of fertility. We are uninformed, misinformed, and denied access to safe and effective methods of birth control. Wimmin are forced to play roulette with their fertility. Some refer to conceiving as "falling in"

as if into a hole, or a trap, from which there is likely to be no escape.

Belinda: Did you plan to get pregnant?

Anita: No.

Belinda: How did you feel about it?

Anita: Pretty terrible. Well, it took a while to get used to it and then it was alright.

When I found out I was having twins I felt I didn't want to have them but it was too late.

Brenda 'fell in' when she was 19. She kept the baby but he died at 3 months of a cot death. The second child was planned but Brenda became pregnant again shortly after she was born.

Belinda: Did you plan to have Mary and Jane?

Brenda: Mary we did but Jane we didn't. We really wanted Mary, but Mary was only 9 months old when I got pregnant and I wasn't very happy right through the pregnancy with Jane. I didn't want her at all.

Hilary has a daughter. It was a shock to discover she was pregnant.

Hilary: Alice was born in January and it would have been...the middle of October, I found out I was four months pregnant. It was a real shock because I'd been on the pill.

"Falling in" also came as a shock to Kim who was 15 at the time.

Kim: It was just one of those things. I just didn't think it would happen to me and - bang! I was sure I couldn't possibly be pregnant - there you go.

Neither of Carol's pregnancies were planned.

Belinda: Had you planned to get pregnant with Michael?

Carol: No, It didn't bother me.

Belinda: Did you want another child after that?

Carol: No, I didn't know I was pregnant with Susan until I was about 4 months gone.

Fiona, like many wimmin, planned to have a child one day but not at the time she conceived.

Belinda: Had you planned on having children?

Fiona: Ye-s, although we hadn't planned to have him when he happened, but we were quite pleased. I don't know how long we would have waited had it been entirely our decision. But I was about 24, going on 25, so that was old enough, I suppose.

When the decision appears to have been made "for you" there is a sense of inevitability in which wimmin resign themselves to the outcome: that it was going to happen anyway so it might as well be now. It is not surprising that wimmin do not feel they have a legitimate right to decide when to conceive. There are two important and related aspects to the sense of inevitability. The concrete reality is that wimmin generally do not have effective control of fertility, and they do not exercise control over what happens after the child is born. The social role and the division of labour have already been determined.

Judith: I don't know. I think its a funny situation. I know with me, and perhaps with a lot of wimmin. As you're approaching 30, you're just starting to get real success in your job, if you've got a career - and then suddenly you've got to think, well, what am I going to do? I think that sort of happened to me. I was really getting job satisfaction. I was going well in my job. I was getting good money, and then I sort of had to think - well, look, 30 is looming up - make a decision pretty soon. You know, a definite decision. It's one of those things that's sometime - never. I think perhaps its easier just to fall pregnant than to choose to go off the pill or whatever, make a conscious decision about it.

The ability to decide when to conceive does not alter the experience of raising children in patriarchal society, of being pushed into the role of childcarer, of losing financial independence, and so on. There is no 'right' moment to conceive when the social relations of patriarchal reproduction determine the division of childcare labour.

However, the struggle to take control of fertility so that wimmin can decide if, and when to have a child is crucial to the struggle against male social power.

"Falling in" is not simply a matter of chance, or of bad luck, nor is it about the relationship between a womin and child. The real relations are those between males and females. The vulnerability wimmin experience through not having control of fertility is not because of biological or psychological factors, it is because men are politically stronger than wimmin and have taken control of the means of contraception.

(1) Birth Control Blues

The wimmin I interviewed had all experienced problems with birth control methods, some worse than others. Hilary not only had adverse side effects with the pill she was prescribed, she became pregnant while taking it.

Hilary: I'd been on the pill. I hadn't wanted to go on it. I had problems with my periods, and then she [her daughter] sort of came along and told them where to stick their packet of tablets. It was a low dose pill. I was actually on it for about 6 months and the first few months I had terrible break-through bleeding - which hadn't been explained to me. And I was horrified, thinking all kinds of things were happening, and ah, like cancer and all the rest.

Hilary was not informed by her doctor that because the mini-pill is not as effective as the combined pill (with estrogen and progestogen), and since wimmin who become pregnant while taking it usually do so within the first 6 months of use of backup method, a spermicide or condom, should have been used.²⁵ She was not informed that should heavy breakthrough bleeding, or severe diarrhoea or vomitting occur, a backup method should also have been

used. Hilary was not informed that heavy breakthrough bleeding is cause to consult a doctor.

Most wimmin have problems with the contraceptive method they are prescribed at some time or other. Most wimmin simply put up with it.

Brenda: I had an IUD fitted. Its good, no problems. Oh it took a bit of getting used to, because one of the side effects was very heavy bleeding and I'm a bit anaemic. It took a lot out of me, but as long as I have a regular check up I'm quite happy with it.

Wimmin are often coerced into using particular birth control methods. This can occur through the failure of a doctor to explain the risks involved, or of periods when the method is unsafe, or of alternative methods which may be preferred. The doctor has immense power to manipulate patients. For example, Kim's doctor injected her with Depo Provera because she decided that Kim could not be "relied" upon to use a birth control method over which she herself would exercise control. The doctor neglected to warn her of the risks known to be associated with the drug. (Depo Provera will shortly be examined).

Belinda: What contraception are you using?

Kim: I've had an IUD, I've had the injections, pills...

Belinda: What were the injections?

Kim: Depo Provera.

Belinda: You're not on them now?

Kim: No way, I was furious. I was only on it for two sessions. [6 months] It was actually my GP that persuaded me into that, mostly because I was 'unreliable', but I couldn't believe it when I saw a documentary. I was absolutely furious.

Belinda: What do you mean 'unreliable'?

Kim: Well I wasn't. When I went onto the injection I wasn't on any contraception and she didn't - she had this theory, she might be right. That after you adopt a child out there's a chance you'll go and get yourself pregnant again, um, to replace or get false affection, or something. She was scared I'd just go out and do the same thing again. I think at that stage I couldn't think of anything

worse. As far as I was concerned, men were the pits and they were staying that way. But, um, she put me on this injection. And like I said, I had two and then I went back on the pill, and then just before I got married I got an IUD, which went up one of my tubes and I had to go into Christchurch Women's and have it removed.

Kim was 15 when she became pregnant. She was not using a contraceptive method, not because she was incompetent or 'unreliable', but because she was unaware of the dangers and of the options for protecting herself.

Carol was badly affected by the contraceptive pill.

Carol: On the pill I used to get really depressed and tired and cry a lot. So I wouldn't take it.

Carol later went to the doctor, knowing she was pregnant.

Carol: I was angry because I knew I was pregnant but I went to a GP and he said no way, because I'd had periods. He said a woman can't possibly be pregnant and have periods, you know, "You're constipated, here take these." But I knew I was pregnant. And then 6 weeks later I'd got fatter, I went to another GP. He was older, about 60. He just took one look at me and said, "Dear you're pregnant".

The "expert/patient" relationship is a social form of the patriarchal relations. For women, the power of the expert and of males in the medical institution is one and the same. But it always appears as if women are dealing with an impersonal, authoritative professional who has the expertise to recognize when they are 'neurotic' or just being 'silly'. The fact that some doctors are women does not alter the relationship of authority and submission, as Kim's experience demonstrates. The teaching, practices and ideology of the medical institution are grounded in the patriarchal infrastructure. However, the power relations do not solely derive from patriarchy. The development and distribution of medical care is also determined by the

social relations of production. The chief contradiction is that the medical institution has the monopoly on medical knowledge, skill and technology and this forces wimmin, and all those outside of the structure, to submit to their control, to obtain the medical care they require.

At this level the argument becomes increasingly complex and concrete because we are dealing with the operation of two powerful sets of social relations. Before attempting to account for the complex social forces responsible for the present day form of fertility control, I examine the past to show that males have not always held a position of dominance in this area of wimmin's lives. The Zhū Twasi people, discussed earlier, demonstrate this fact. The past is also instructive because it contains within it glimpses of possibilities for the future.

5. A Brief History of the Means of Contraception

Contrary to what we are told today, the original "medicine men" were actually wimmin. Womin the forager was also a botanist and pharmacologist.

*The connection of women with the cultivation of the soil and the search for edible vegetables and roots made them specialists in botanical knowledge, which among primitive peoples, is extraordinarily extensive. They became acquainted with the properties of herbs and were thus the first doctors... The word 'medicine' is derived from a root meaning 'knowledge' or 'wisdom' - the wisdom of the 'wise woman'. The name of Medea, the medical herbalist witch, comes from the same root.*²⁶

Wimmin have always practiced birth control. Many of the early inventions were ingenious. In ancient Sumatra wimmin moulded opium into a cuplike device and fitted it over the cervix.²⁷ In some Eastern societies, a kind of

silky paper called 'musgami' was used in the same manner. And in parts of Europe, beeswax was melted into cervical discs. Vaginal spermicides are not a recent invention either.

As early as the 19th century BC, formulae for spermicides appear in writings.²⁸ The ancients had discovered that environments that were either strongly acidic or strongly alkaline were hostile to sperm. The Greeks attempted to use oil of cedar and frankincense in olive oil to block the cervix. As with the wimmin of today, only wealthy Greek wimmin had access to certain methods of birth control. In Egypt, wealthy wimmin used a vaginal paste mixed from honey, sodium bicarbonate and dried crocodile dung. Indian writers in the eighth century describe the use of rock salt, dipped in oil or in honey (salt in an 8% solution is deadly to sperm). In Europe a very popular method was a sponge moistened with diluted lemon juice. In all societies infanticide and abortion were practised, either with social sanction or in secret.

In Aotearoa, Maori wimmin used toi-toi as an abortifient.²⁹ It was boiled and then swallowed. The leaves of the poroporo were also used. Poroporo contains a steroidal alkaloid Solasodine, which is an important ingredient in contraceptive pills today.

Until the 19th century, European, British and American common law generally tolerated abortion before 'quickenings'.³⁰ This is the stage at which a woman feels the fetus move and ^{it} usually occurs by the twentieth week. Theologians in the Catholic Church held that the fetus was animated by the entrance of the soul which occurred at

40 days after conception for a boy, and 80 days after for a girl. They believed that the female soul was weaker and lower than the male, falling somewhere between male humans and animals. Until the late 19th century, clerics were tolerant of early abortion. The Catholic Church decided abortion was 'murder' in 1896.

In white European society, periodic abstinence, withdrawal and abortion were the primary methods of birth control prior to the development of the diaphragm. By the 19th century these methods had generally replaced infanticide and lactation as methods of limiting fertility.³¹

National studies of fertility show that the reduction in the size of families occurred long before the intensive contraceptive campaigns of the early 20th century and the interwar period.³² In the white settler state New Zealand, the rate of white fertility prior to 1880 was very high. The average annual crude birth rate of 41.5 per thousand was higher than that of Britain or north west Europe.³³ The average number of children per family was 6, but in less than a generation, 1860-1870, the average number fell to 3.

Between 1890 and 1900 the proportion of births deemed illegitimate had increased by one third. Under a Supreme Court ruling passed in 1888, all children of Maori marriages were deemed 'illegitimate' unless the parents married in the white religious/legal ceremony.³⁴ This law was not revoked until 1955.

The decline in fertility rates was achieved by a substantial increase in the practice of abortion and contraception. This took place despite the social policies

of the time which were strongly against wimmin controlling fertility. In 1905, a medical practitioner wrote in the New Zealand Medical Journal about:

*...the disgusting nature of this practice... the highest degree immoral. To stunt and deaden the divinest emotion of the soul is worse than suicide - it means the destruction of one's highest nature.*³⁵

A powerful component of the patriarchal 'pro-breeding' campaigns was white racist supremacy. There were fears that the white race would be 'overrun'. The decimation of the Maori people under white colonialism put paid to these fears. The following editorial appeared in the New Zealand Medical Journal in 1922.

*If countries suitable for the white race are not to be fully populated and developed by the white races, it means one of two results. Either these countries will be over-run by coloured races, or there will be the most bloody and horrible wars for racial supremacy. The mind shrinks from either alternative. We have read the arguments advanced by the advocates of the general and extended use of contraceptives, and they do violence to everything that is sacred to the name of nature, morality, science and commonsense.*³⁶

Fascists around the world took up the goals of the eugenicists, to champion the childbearing of white wimmin and eliminate the 'unfit' such as Jews, Maoris, Asians, and other 'undesirable' races.³⁷

The rapid decline in the birth rate after 1880 was accompanied by a doubling of mortality from septic conditions following abortion. Law and medical reports from the period refer to widespread trafficking in instruments and drugs to procure abortion. There is no accurate method of assessing the extent to which abortion was practised, as there was no statutory requirement to report abortion and the overwhelming majority were carried

out illegally.³⁸

Under the Crimes Act, 1908 it was an offence to procure a miscarriage. However, legal and religious laws have never prevented wimmin from obtaining abortions. In any historical epoch irrespective of patriarchal controls, a womin desperate enough will somehow procure an abortion, and untold wimmin have died in the attempt. Wimmin have always worked together to help each other control fertility. Commenting on the Depression years of the 1930's, Eve Ebbett claimed that:

...women gave each other advice and took their problems to the local abortionist - not all of whom were unhygienic and unqualified. It was said, "If you had the money and knew the right doctor, you could get an abortion" 39

The number of abortions performed in New Zealand soared during the Depression. A committee set up in 1936 because of the ruling class concern with the falling white birth rate and the incidence of abortion estimated that one in five pregnancies were aborted. In the year 1932-33, 26 wimmin died from septic abortion and the figure rose to 42 in 1934.⁴⁰ The deaths resulting from abortion comprised one quarter of the total deaths associated with pregnancy and birth.

Those seeking abortions were not only unmarried wimmin, in fact the MacMillan Committee claimed that abortion was most frequently utilized by married wimmin, as a method of birth control.⁴¹ Another child was another mouth to feed. A letter to Working Woman in 1936 speaks of the constant dread of becoming pregnant.

I, in common with every working class woman, find life one long problem. But I think the most terrible one of all is the constant fear of more babies. I have three already,

*the eldest is just four and I now discover there is to be a fourth.*⁴²

While the MacMillan Committee recommended that the government give financial, domestic and obstetrical assistance to wimmin, and that limited sex education be made available, its attitude was that the primary female role is to breed children. They believed that sexual 'immorality' was encouraged by the use of contraceptives and recommended that their sale be restricted to hospitals, licensed pharmacies and medical practitioners. The first birth control clinic was not opened until 1953, 32 years after the first clinic was established in Britain.⁴³

Sexual intercourse, according to state, church and medical institutions, was not to be separated from procreation. Wimmin were not to marry unless they were prepared to have children as they 'appeared'. They were not to interfere in the "natural process". Wimmin had to prove they were married before they could buy contraceptives. But contraceptives were expensive, and as Ebbett comments:

*You do not buy books, no matter how urgent, with money needed to feed the children. Then there was the cost of the mechanical devices themselves. It may have been false economy, but at the time it seemed cheaper to conceive than pay for the knowledge to avoid conception or the appliances.*⁴⁴

The Marie Stopes birth control manual cost the equivalent of \$40.00 today. For poor wimmin, Stopes advocated a pad of cotton soaked in cooking oil.

The first Labour government consolidated the social role of wimmin as reproductive workers. It introduced measures designed to stabilize the nuclear family form and it firmly entrenched the power of the state to make decisions about wimmin's fertility. In a process that

was occurring in countries around the world, the state backed the power of the medical institution by giving it a monopoly on methods of birth control and on the dissemination of contraceptive information.⁴⁵

The early advocates of birth control believed that once the state secured from the medical institution control of the means of contraception and was solely responsible for their development and prescription, only safe and effective methods would be marketed.⁴⁶ They hoped that the ethical concerns of the medical profession would safeguard wimmin's interests. To explain why this was a false hope requires an understanding of the social realtions embodied in the capitalist medical institution.

6. The Capitalist Patriarchal Appropriation of Medical Care

The process by which female lay knowledge and practice of birth control was appropriated by males in their role of "expert" was a long and uneven one. The state assisted the centralization of medical practice. It restricted the activities of lay wimmin and empowered the capitalist male medical institution to monopolize the means of contraception. The same process edged female birth attendants out, as I explain in the following chapter. The effect of this process was to force wimmin to seek medical care from those who held the monopoly.

All existing technology in this society embodies the antagonisms of capitalist and patriarchal power relations. The contradictions within medicine, as it relates specifically to wimmin as reproducers, are

particularly acute, as it is a male monopoly. It is male medical workers who have accumulated the 'expertise' on wimmin's bodies, from menstruation to menopause. Wimmin have been edged out and alienated in the process. However, the relations of patriarchy are concealed because the control assumes the form of technical, medical issues.

The problems a woman has with the Dalkon Shield, or Depo Provera, or anything else to do with her body, appear as individual, technical, medical issues.⁴⁷ The unequal power relationship between a woman and her doctor is disguised by the social form of the "professional/patient" relationship. The power relations are generated both by the capitalist and the patriarchal infrastructures, but it always assumes the social form of an individual with a problem and an expert with the training and technical expertise to provide the solution.

An essential part of the process in which the social control exerted by the medical institution is mystified, is the way in which "science" and "technology" appear to be external to the agents, to the actual people, as if they are self-propelled. But scientific knowledge does not have a life of its own, it is a social product and it is manufactured within determinate sets of social relations. In capitalist society birth control is a commodity, and like all other products it must make a profit. However, despite the fact that the capitalist drive for profitability dictates the likely areas of research and development, the patriarchal imperative, which is to retain male control of fertility, is the determinative social force.

A major source of funding for research and development is the state and the one most heavily involved is the American government. In 1977-78 the Federal government provided over 50% of the capital for contraceptive research and development.⁴⁸ As women in New Zealand are both consumers and guinea pigs of these products, we have a vested interest in studying the industry.

In 1977-78 almost 40% of the government's funds in America was spent on research in endocrinology in the areas of hormone regulation, ovulation and egg transport, uterine milieu, and uterine implantation.⁴⁹ No money was spent on barrier methods of birth control. Reports made to the Senate hearings on contraceptive development made no mention of the diaphragm, jelly, creams, foam, the cervical cap or the vaginal sponge; the condom was also ignored. Although the condom requires the co-operation of the male partner, it has the added benefit of preventing the transmission of venereal disease. What do all these methods have in common?

In terms of capitalist production they are low value-added commodities, the development of which offers minimal potential for an increase in the rate of profit. In terms of the organization of the medical institution they subvert the social power of the expert over the lay woman. Barrier methods of birth control, backed up when necessary with safe and early abortion technique, such as menstrual extraction, offers heterosexual women the safest and most effective strategy for controlling fertility.⁵⁰ Because of these reasons there are powerful controls, both direct and indirect, preventing this combination of methods

from becoming the predominant means of contraception.

Invasive methods, such as drugs and intrauterine devices are accorded top priority by the government and the manufacturing corporations. The onus on the testing of intrauterine devices is the discovery of adverse side effects of the devices in use.⁵¹ Female consumers assume that the data on the health hazards has been collected prior to the release of a new product. The costs to wimmin of marketing practices such as these are immeasurable. Some of the results are infertility, pelvic infections, unwanted pregnancies, ectopic pregnancies, hysterectomies, and sometimes death. The Dalkon Shield is thought to have been responsible for 17 deaths in America alone.⁵²

I have chosen the contraceptive Depo Provera to illustrate the power relations embodied in contraceptive technology, because it continues to be imported and used on wimmin in this country. Depo Provera, perhaps more than any other contraceptive, shows the depth of the contradictions involved in the patriarchal and capitalist control of birth control. Because wimmin are fertile throughout the major part of their lives and do not control fertility, they are compelled [by those who do] to use whatever means are made available to them. Wimmin all over the world are now discovering they were given pills and had devices inserted in their uterus' that were carcinogenic, made them infertile, or caused them to give birth to deformed children. While the cost is incalculable, the need for fertility control has remained. This is the contradiction that makes wimmin vulnerable to the patriarchal control of the means of contraception.

7. Contraceptive Warfare: Depo Provera

The injectable contraception Depo Provera (a synthetic progesterone-like hormone) was denied approval by the U.S. Food and Drug Administration (FDA) in March 1978. While it was withdrawn from the American market, ruled unsafe for American women, Depo Provera continues to be produced and exported around the world.⁵³

Depo Provera has been banned in 80 countries, but it is not banned in this country. Through an examination of Depo Provera the complex interplay of social forces involved in contraceptive technology becomes clearer. What effects does the drug have on women?

(1) The Effects of Depo Provera

Convenient to use and simple to administer, Depo Provera does not require the co-operation of a male partner and it is almost 100% effective in preventing conception. Not unlike Thalidomide and DES, Depo Provera sounds like a miracle drug.

The animal and clinical studies that have been conducted suggest the following list of long term effects of "fall out":

*- a lowered life expectancy; temporary or permanent infertility; anemia; diabetes; uterine disease; permanent damage to the pituitary gland; lowered resistance to infection; deformities in offspring and cervical, endometrial, and breast cancer.*⁵⁴

The immediate possible side effects are:

- abdominal discomfort, substantial weight gain or loss; depression; loss or suppression of libido and/or orgasm; headaches, dizziness; loss of hair; spotty darkening of facial skin; elevated levels of sugar and fatty substance

in the blood; nausea; limb pain, vaginal discharge; breast discomfort and disruption of the menstrual cycle.

Loss of libido and/or orgasm are categorised by the experts as minor side-effects. A male contraception entailing sexual dysfunctioning for men would be unacceptable, as would chemically induced depression.

The side effects are not experienced uniformly by wimmin. For example the almost total disruption of the menstrual cycle can produce severe anameia in well-nourished wimmin but the dangers for under-nourished wimmin are far greater; as are the effects of weight loss. The promotional literature distributed by Upjohn, the manufacturing company, in African countries recommended the drug for lactating wimmin, as it does not decrease milk production. However, the high concentration of the drug found in the breast milk of lactating wimmin raises concern for the safety of the child.

Studies on nursing mice have shown that Depo Provera significantly delays the reproductive development of the female. There is also a risk to the fetus exposed to the drug in utero. A submission from the FDA warned that: "In the Bureau's view, this could result in an increased number of infants born with serious congenital malformations."⁵⁵

In 1972, studies carried out by the FDA and Upjohn found that Depo Provera and several other progestins caused malignant breast tumours in beagle dogs. It was another 6 years before the drug was banned from use in the U.S., and it continues to be dumped on wimmin, predominantly indigenous wimmin, around the world.

(2) The Capitalist Drug Industry: Scientific Research

The manufacturers of the drug dismissed the findings of the 1972 research by arguing that dogs are uniquely sensitive to progestins and that beagle dogs are more susceptible to breast tumours than humans. In 1976 the Human Reproduction Unit of the World Health Organisation concluded that the beagle dog is an appropriate animal for testing the long-term effects of sex hormones on the human breast. From animal to human studies, the evidence suggests that Depo Provera increases a woman's chances of developing cervical cancer by up to 9.1 times.

In 1968 Upjohn began a seven year beagle and ten year monkey safety study on the drug. Within four years, 18 of the 20 dogs in the first study were dead; the two remaining dogs survived after having hysterectomies. In the control group, one dog died; from pneumonia. At least 2 of the animals in the monkey study developed endometrical cancer, a condition which is extremely rare in rhesus monkeys.

In Upjohn's next study, the research team circumvented the problem by performing hysterectomies on all of the dogs before injecting them with Depo Provera. The explanation offered by the company was that the study was undertaken to learn whether Depo Provera would cause breast tumours, not to see what effect it had on the uterus.

In studies conducted on women, the dramatic increase in cervical cancer had been known before 1971; the year that the FDA decided to discontinue all Depo Provera tests on women. But cancer was not the only finding in Upjohn's studies.

All of the dogs developed anameia, and in the second dog study, the deaths of several dogs was attributed to "drug induced diabetes". An important point made by Genea Corea in her assessment of the drug is that not only does it attack fertility, but in weakening natural female defense mechanisms against disease, it suppresses people's ability to fight back. While advocates argue that the use of the drug is partly designed to lower the maternal mortality rate in under-developed countries, Corea argues that "...by increasing the susceptibility of child-bearing women to fatal disease, Depo Provera may, in fact, be raising the death rate among these women".⁵⁶

(3) Imperialism: The International Connection

The US Drug Regulation Reform Act allows drugs that have been ruled too dangerous for consumption by American citizens to be exported abroad. Carol Downer, a director of the Los Angeles Feminist Women's Health Center, commented: "We can fight against a problem here, only to see it exported to women overseas."⁵⁷ How does dangerous contraceptive technology get exported overseas?

At the level of the capitalist state, under-developed countries negotiating for loans from organisations such as the World Bank, are pressured to demonstrate that they are dealing with the "population problem", or else jeopardise their requests for "aid".⁵⁸ In September of this year, the World Bank quadrupled its financial aid for 'family planning' programmes to US\$2 billion. The US has denied funds to private bodies that promote abortion and requires countries which sanction it not to use American financial

aid for abortion programmes.⁵⁹

At the corporation level, drug companies like Upjohn and G.D. Searle (a manufacturer of birth control pills) employ large-scale bribery tactics to gain access to markets overseas. Upjohn admitted to the US Securities and Exchange Commission that in order to secure sales it made payments of more than \$4 million to employees, and intermediaries, of foreign governments and to hospital workers, from 1971 to 1975.⁶⁰ But dumping harmful contraceptives on overseas markets is not only a business practice, it is part of the foreign policy of the US.

In an interview in 1977, the head of the US Agency for International Development (AID) commented:

*Population explosions, unless stopped, would lead to revolution. [Population control is required to maintain] ...the normal operation of U.S. commercial interests around the world... without our trying to help these countries with their economic and social development, the world would rebel against the strong U.S. commercial presence.*⁶¹

At the US Senate hearings on contraception in 1978, the US Defense Department argued, that as world population growth was a national security issue, responsibility for slowing that growth should be handed over to the Military. Genea Corea observed: "experts testifying on contraceptives ...occasionally sounded like army generals giving Congress men a briefing on a new weapons system." The following language was used - "the vaginal delivery system," "target organ," (uterus), "subject compliance," "delivery platform," and "target population."⁶² The language not only affected the objectification of women's bodies but the militarization of their organs as well.

The "target population", typically comprises poor, indigenous agrarian and working class wimmin. The racist distribution of Depo Provera is an integral part of capitalist patriarchal control over fertility. The programme is designed without follow-up, the doctors inject the wimmin and do not see them again for three to six months, and then only to re-administer it. Obtaining informed consent is not part of the service.

"[T]he injection of women with Depo Provera is human experimentation on a massive scale."⁶³ And the experiments are being conducted in this country.

(4) Aotearoa - The Local Connection

Wimmin in this country are not only prescribed Depo Provera, they are currently being used in an experiment by Upjohn, working in conjunction with the state, through the Family Planning Association and general practitioners. The state subsidises to the medical institution greatly reduce the study's costs for Upjohn. The planning and design has taken place largely in the US. An executive committee to co-ordinate the research locally comprises statisticians from the US (4), Australia (1), and Aotearoa (2).

A group of doctors agreed to co-operate in 'enrolling' the wimmin into one of 4 groups: pill users, I.U.D. users, Depo Provera users, and natural family planning. A total of 12,000 wimmin are involved: 3000 in each group. The study is being conducted over a 5 year period. Criticisms of the methodological weaknesses of the study include: that it will not provide any definite

evidence of the safety or otherwise of the carcinogenicity of Depo Provera: lack of an adequate control group; the difficulty of keeping the same wimmin involved in the drug user group for 5 years; and the inadequacy of the follow-up period.

Given the evidence already assembled as to the carcinogenic effects of the drug and the related health hazards, the co-operation of the state and the medical institution with the Upjohn Company is an outrage. It is an assault on the wimmin in Aotearoa, and particularly on the black and working class wimmin in this country.

*Sorting through files of a local abortion clinic we have discovered that 42% of Maori women and 11% of Pakeha women had been given the injection. It's the new eugenics given especially to women who are seen as the least desirable breeders.*⁶⁵

A Doctor at Otago University Medical School has estimated that approximately 15% of white wimmin and 25% of black wimmin have used Depo Provera at some time.⁶⁶ Included in the category of "least desirable breeders" are wimmin in state institutions, such as psychiatric hospitals where there is no informed consent.

Phillida Bunkle has noted that the Upjohn Company not only manufactures the drug, it also manufactures most of the information about it.⁶⁷ The information obtained from wimmin here is sent away to the company's headquarters in the US. The Family Planning Association was assured by a representative from Upjohn that they would have access to the results of the survey, but there is no written agreement.⁶⁸

Depo Provera is not an isolated case of the negligent development and distribution of a harmful contraceptive.

The list of such disasters grows longer each year. Depo Provera highlights the vulnerability of wimmin to the institutions and organizations which control their access to the means of contraception. We have little choice but to take what is offered and if we discover, having spent 5 or 10 years using one particular product, that the laboratory animals died of cancer or thrombosis, the problem of preventing unwanted pregnancies remains. We are still in the position of having to accept products on the basis of the information we are supplied.

The birth control techniques we are offered are notable for two things, apart from the health hazards. Men are involved at some stage, as suppliers, inserters and 'authorities', and their co-operation is essential if condoms are used. The second feature is that we are only offered those commodities which reap a profit for the manufacturing companies. Female controlled techniques are essential for taking control over our bodies, labour and lives, for separating sexuality from reproduction. At present, too few wimmin have access to the information and support necessary for developing this form of self-determination.

8. Summary

I have investigated two aspects of patriarchal reproduction in this chapter: male use of force and male control of wimmin's fertility. I have argued that the tendency for some form of compulsion to characterize heterosexual sexual intercourse is not causally related

to sexuality but stems from the power men gain over wimmin on the basis of the activity of gestation. Once the unequal power relationship has been established it extends throughout the social process of reproduction. I have argued that violence is unnecessary for compelling wimmin to be the reproductive workers but men can get away with using force because they are politically stronger than men. I have not investigated the material conditions that weaken wimmin's ability to resist the use of force because they are generated by other mechanisms. They will become clearer as the analysis becomes less abstract.

The second area of vulnerability associated with the moment of conception is the need to control fertility. The monopolization of the means of contraception by male institutions makes it difficult for wimmin to avoid 'falling in' to the social role of parenting. For as long as wimmin do not control fertility, female sexuality, childbearing and patriarchal parenting will be inseparably tied in wimmin's lives. In the next chapter I examine wimmin's experiences of birth and the social relations that determine birthing practices.

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CHAPTER FOUR

THE SOCIAL RELATIONS OF BIRTH

1. Introduction

*It is our belief that traditional obstetrics, which places us on our backs, knocks us out for the delivery, and robs us of our childbearing experience, both symbolizes and actualizes the role of women in this society as passive victims.*¹

Childbirth is a unique female experience. Until recently it was an activity presided over by wimmin, but now males control birth in their role as medical expert. Having appropriated social resources, medical skills, technology and expertise, males now maintain a near monopoly on health care. Wimmin alone have the birth experience and do the real work, but the form that this experience takes under patriarchy is alienated labour. The male takeover of birth has culminated in the situation where it overwhelmingly appears as a male achievement.

In the delivery room the male role is active, purposive and dominating, while the female role is passive and subordinate. Some obstetricians encourage wimmin to 'participate' in their delivery, but the essential power relationship remains unchanged. The male doctor, sometimes in alliance with the male partner, exercises control over the location, pace and method of the work process. Because of the institutional monopoly of health care, a woman is compelled to go to the hospital to give birth, and in so doing, she is isolated and separated from other wimmin. Her

capacity to resist and to take charge of her delivery is undermined. Often left alone for hours and surrounded by machinery and unknown birth attendants in uniform, wimmin's social power is at its weakest.

The moment of birth in patriarchal reproduction involves many contradictions and interacting forces. In the doctor's surgery and in the delivery room a woman not only confronts the social power of men, she also confronts the power of the class system. She experiences their combined and concentrated effects at a time when she is most in need of support and least able to take on a fight.

The power relations of obstetric practice and technology are both patriarchal and capitalist. If the latter social relations are not understood, the analysis tends to slide into an idealization of childbirth which is unable to account for the experiences of the wimmin. Their need for health care has really nothing to do with medical 'high tech', as the institutional classification of 'high risk patients' would have us believe. The mechanism responsible is the class system and the conditions it generates such as poverty, malnutrition and differential access to education, health information and medical care. In this country the phenomenon of 'high risk' is also generated by the white racist system. Maori and Polynesian infants die in massively disproportionate numbers to white infants. The social relations of gender are not the only determinative relations of wimmin's experiences of childbirth.

The debate over obstetric practice centres mainly on the "medicalisation" of birth. Much of this chapter involves looking at wimmin's experiences of various technologies, but

technology is only the form of the social relations. Medicalised childbirth conceals and disguises the real relations of power. The visible social form is that people have certain illnesses or conditions requiring medical attention. The only way they can receive health care is through the hospital system in which care is monopolised, centralized and sold as a commodity. Despite the fact that the overwhelming majority of deliveries do not require medical intervention, wimmin are compelled to go to hospital where the labour process of birth has been transformed into a medical event, an illness, a potential crisis situation requiring medical intervention. The female activity of birth has been subordinated to the social process in which males have taken charge of reproductive labour.

In this chapter I investigate patriarchal control at the moment of birth. I look at the historical process by which wimmin become excluded from medical practice, a process which began before the rise of capitalism. The experiences of the wimmin I interviewed demonstrate the argument of the chapter, that the social relations of patriarchy have transformed childbirth into a male achievement.

2. Medicine Men and the Appropriation of Healing

The historical rise of the male medical profession was simultaneously the process by which wimmin were ousted as healers. It was also the process by which healing and medical care became a commodity.

Ehrenreich and English comment that the story of the usurpation of female healers might be told as an allegory of

science versus superstition, in which the triumph of the former was as inevitable as human progress or evolution: the experts triumphed because they were "right".² But despite the stories we are told, the outcome was not inevitable, it was the product of struggle. The male takeover was not successful because male experts were "right". They triumphed because men occupied a privileged position in society and thus were better placed, forcibly to push women out. It was not a matter of getting the Church and state on their side, since males were the Church and state.

In the west, the conflict between women's experience and male expertise centred on the "right to heal". Until the 14th century, except for the very rich, women had the prerogative of healing, not only as midwives caring for other women, but as general practitioners, herbalists and counsellors. They served both women and men. The men who practiced healing, those who served the wealthy, developed a different method of organizing their activities.

The female lay healer operated within a network of information sharing and mutual support whereas the male professional hoarded his knowledge as a kind of property.³ He dispensed it to the wealthy and sold it on the market. The triumph of the male expert required the destruction of women's networks of mutual support, leaving women isolated and dependent. As males transformed healing into a profession, the dominant characteristic of exclusiveness was also the organizing principle. Expertise became the prerogative of the privileged and was acquired through institutions from which women were barred.

The first major attempt to eliminate women from medical

practice was aimed at those who competed with the male professionals, the literate, urban, female healers. For example, in 1322 a French woman, Jacoba Felicie was brought to trial by the Faculty of Medicine at the University of Paris on charges of illegal practice.⁴ Witnesses affirmed her capabilities as a healer and surgeon, but her competency was not the issue. The real charge was that as a woman, she had no right to cure at all. Similar trials were conducted throughout Europe, and by the 14th century male doctors had won a clear monopoly over the practice of medicine among the upper classes, except for midwifery which was to remain a female dominated occupation for another 3 centuries.

The next major attack was more general and was aimed at all female healers. It took place in the late 15th and early 16 centuries in the form of 'witch hunting'. Although the witch hunts were linked with several broad historical developments, such as the Reformation and the beginnings of commerce, female lay healers in particular were singled out for persecution. Witch hunting is one of the most horrific forms patriarchal violence against women has ever taken. The charges levelled against 'witches' included: rendering men impotent, copulating with the devil, eating newborn babies, poisoning livestock, providing contraceptive measures, offering drugs to relieve pain, performing abortions, and so on. One of the wise women (patriarchy's witch) who was subjected to the greatest vilification was the midwife.

*The greatest injuries to the Faith as regards the heresy of witches are done by midwives; and this is made clearer than daylight itself by the confessions of some who were afterwards burned.*⁵

The church played a major role in the rise of the male

expert. During the witch hunts the church denounced non-professional (that is non-university trained) healers. It was a fait accompli, "If a woman dare to cure without having studied she is a witch and must die".⁶ Witchcraft was knowledge, skill and wisdom derived from experience and shared information. Since wimmin were not permitted to enter the patriarchal institutions in which legitimate study was undertaken female healers were witches by definition. While nothing was necessarily wrong with the development of systematic training and some mechanism of accountability, the problem was that this development took the form of an exclusive and patriarchal appropriation of knowledge and skill.

(1) Midwifery: the Oldest Profession

The origin of the names of childbirth attendants highlights the fundamental difference in approach to parturition between wimmin centred birthing and the patriarchal method. The word 'midwife' is derived from the Old English, "with womin". "Obstetrician" is from the Latin, "to stand by", and "accoucher" is from the French, "to put to bed".⁸ In the past wimmin healers in attendance waited for birth to take its course, intervening only in the case of abnormality. They intervened only to assist wimmin in labour, not to assert control over them.

Until approximately 250 years ago wimmin throughout the world gave birth in some kind of upright position. Sometimes wimmin gave birth on their own but they were usually attended by other wimmin. The birth stool dates back as far as 2500 BC. This was a horseshoe shaped chair with a cut-out seat through which the baby was delivered or "caught" by

waiting hands. The Bible makes several references to wimmin giving birth in the upright position. Iroquois wimmin gave birth in a support squat position with their arms around a person's neck. Another position is to be seated on the ground in someone's lap, or to push against a wall or other firm structure with your feet while leaning against another person. In some societies a kind of mechanical support was provided to help maintain an upright position.

When patriarchy asserted dominance over childbirth wimmin were placed on their backs, in the "stranded beetle" position. This practice both epitomizes and actualizes the political power men have over wimmin. But the first major development in the patriarchal takeover of childbirth was the appropriation of birthing technology.

(2) "Iron Hands" - the Male Takeover of Birth

From a secure position of dominance within the practice of medicine, men were well placed to evict wimmin from the last sphere of autonomous female health care, obstetrics. The triumph of the male midwife is commonly associated with the development of the surgical forceps, or the "iron hands" as they were originally called.

Forceps were invented in 1588 by two French doctors, the Chamberlen brothers. They consisted of a pair of obstetric forceps, a vectis or lever to be used in grasping the back of the head of the fetus, and a fillet, or cord used to help draw the fetus out, once disengaged from an abnormal position.⁹ The forceps was an advance in dealing with complications, but it was badly used by many, the child dragged from the

womin's body piecemeal and the womin's pubic bone, and vagina used as a fulcrum and often permanently mutilated.¹⁰

The Chamberlen brothers kept the "iron hands" a secret for nearly a century, eventually selling the rights of the instrument to a Dutch university. In 1773 the original design of the forceps was publicly revealed and became available to all birth attendants, that is, to all male birth attendants.

The second major change in obstetric practice initiated by male midwives was the introduction of lithotomy: placing wimmin on their backs for delivery in the "stranded beetle" position. Some sources attribute this innovation to a French doctor, Francois Mauriceau, who attended to the French Queen.¹¹ Whoever was responsible, we can be certain that the new position was first imposed on upper class wimmin and only filtered down to the lower classes when the male takeover of obstetrics was secured. The "stranded beetle" position is not beneficial to the labouring womin or to the fetus. It was introduced because it makes it easier for the obstetrician to perform vaginal examinations and obstetrical maneuvres, without straining his back.

The lithotomy or supine position is the standard practice today in western countries. The President of the International Federation of Gynaecologists and Obstetricians commented that "except for being hanged by the feet, the supine position is the worst conceivable position for labour and delivery."¹² The major criticism of the lithotomy position is that in this position the heavy uterus compresses the inferior vena cava and the aorta (a main artery supplying blood to the fetus), lowering the womin's blood pressure.¹³

This in turn reduces the supply of blood to the uterus, also cutting the supply of oxygen to the fetus, on which it thus has an unfavourable and distressing effect. In the lithotomy position, uterine contractions are less efficient, labour is longer and the labouring woman is generally in greater pain than when in the lateral position, sitting, standing, kneeling or squatting. Midwives continued to use the birthing chair or encourage squatting.

The struggle between the midwives and the male "barber/surgeons" became public over the exclusion of the former from the use of surgical instruments. In the medical press the conflict was ideologically presented as a battle between science and knowledge versus superstition and ignorance. Midwives were portrayed as drunkards, as "ginswillers", which is fitting considering the patriarchal association of gin as "mothers ruin". As Brack comments, history records obstetricians as "brave men who were pioneering in improvements while they withstood the attacks of the midwife who saw her livelihood slipping away from her."¹⁵ Midwives spoke out in defense of their methods, producing pamphlets and handbooks in which they presented their case.

In an excellent feminist argument published in 1760, Elizabeth Nihell defended the patience, expertise and capabilities of female birth attendants. She accused the surgeons of using forceps to force labour prematurely and to shorten the time of normal deliveries for their own convenience, or for experimental reasons. Nihell claimed that men had justified their intrusion into the profession by "forging the phantom of incapacity in women", and by "the necessity of murderous instruments".¹⁶ She emphasized

the midwives' constant and intimate experience of the female body and reiterated that labour is a process that must not be rushed, but be permitted to take its natural course. The pain of labour could be relieved through "a thousand little tender attentions suggested by nature and improved by experience".

Adrienne Rich suggests that had midwives been permitted to use forceps, Nihell's condemnation of them would probably not have been so sweeping.¹⁷ As with other midwives, Nihell suggested that she would use them as a last resort, with great judiciousness and care. Left to midwives, forceps would never have become the major symbol of the profession nor used to gain control over the delivery.

The ideology (but not the method) of science was used to displace women from the control of childbirth. The concrete experience of birth was reorganized by patriarchy, both physically and psychologically. But the rise of the male obstetrician must be located in socially and historically specific conditions. For example, the survival of midwives varies greatly in America, Europe, Britain and the colonies, such as New Zealand. The role of the emerging capitalist state must also be taken into account. Through its growing powers, the state was instrumental in destroying the activities of midwives, by legitimizing the medical profession's monopoly of health care. Access to the advances in medical and surgical knowledge, such as anaesthetics and laboratory techniques, was progressively denied to midwives through the state's regulation.

The process in which childbirth was taken over by the male medical profession was a long and uneven one. It is

too vast to document here. The political effect was to subordinate the labour process of birth to the social relations of patriarchal reproduction in which males control childbirth. I now examine the experiences of some wimmin in childbirth today. The aspect I begin with is the effect on wimmin of the medical profession's monopoly of knowledge and information. Wimmin are inadequately prepared for childbirth and this has a profound impact on their experiences.

3. Patriarchal Childbirth: A Male Achievement

(1) "Up the Garden Path"

Wimmin are not adequately prepared for childbirth. The prevailing attitude is "what you don't know you won't worry about". Wimmin are denied the information required to make important decisions about how their delivery will proceed. For example, in this country a woman has a one in ten chance of having a caesarian birth (where the infant is removed from the abdomen after an incision has been made). For a first birth, the rate is about 12 or 13 per cent.¹⁸ Some doctors inform wimmin of the real likelihood of a caesarian, but this is not common practice. By failing to be informed, wimmin are denied the opportunity to learn of the choices available, such as preferences about pain relief, the choice between epidural and general anaesthetic, and the right to have a partner or friend present during the birth if a caesarian occurs. For the latter, permission must be obtained from the head nurse, obstetrician and anaesthetist. When it is granted, it is generally limited to those where an epidural is used.

None of the wimmin I interviewed felt adequately prepared by medical staff.

Kim: ...they show you movies [ante-natal class] on deliveries, they go through the deliveries with you, and they bring a baby down and bath it, and just, basically preparation. At the time I thought that everything they said was all you needed to know, but it's not true. I mean they're rubbish - if you think you know that much you're in for a bigger shock than you think.

When Ann Oakley investigated wimmin's experiences of childbirth she found that the dominant metaphor was "shock".¹⁹ The failure adequately to prepare wimmin contributes to the process in which wimmin are robbed of control over delivery. What wimmin are prepared for, however, is a sense of failure, or inadequacy, which is reinforced by the idealized textbook versions of birth. The books are generally written by male experts who describe an event that wimmin's personal experiences are bound to fall short of.

Gay: When I went to the Parent Centre classes they played down the pain and so I wasn't prepared for it. And it's so fucking awful. It is the most painful experience I've ever had.

Hilary: I didn't feel that the ante-natal class prepared me for the pain.

Having a home birth is no guarantee that a woman will be better prepared.

Fiona: ...it was a posteriori birth. The two back bones, mine and his were grating against one another, and that's what the pain in the back was. And then afterwards they said "Oh, most first births are posteriori." You know! Nobody told me that - I could have lynched the lot of them.

Fiona had read the textbooks and felt that she was prepared, but she could not help feeling that she had 'failed' in some way.

Fiona: You sort of get this textbook labour, it doesn't vary much. But my labour was totally different [laughing] from what I expected. You know, I felt at the end that I'd sort of failed in a way.

Belinda: Why?

Fiona: Because it wasn't quite what the book said it should have been. I didn't cope with it in the way the book said. Because it wasn't like - I just had one continual pain in my back the whole time and they talked about these slow pains that started slowly and build up, and had a rest in between. And they were all up front - and this wonderful breathing and that - and all I could do was moan and swear and huff and puff.

The failure to provide basic information on hospital procedure and 'patient' rights can have a devastating effect.

Carol: I didn't know you could have your mother at that time...it was frightening, you know. You go into the theatre and you know absolutely nothing. I mean you see it in the movies. You see all these faces with masks over them and you just don't know what you're in for...you just feel so lost. It was just you and no-one else, so isolated.

The consequences of inadequately preparing wimmin for childbirth is to enforce submission, to alienate them from their own deliveries and sometimes from the child. Nola had a caesarian birth which was carried out in such a way that she felt estranged from her daughter for 5 days.

Nola: She didn't start nursing well until she was 5 days old and it wasn't until she started nursing that I felt as if I'd had a baby. I was just - it was just as if I'd had surgery and I wasn't interested in anything else, except ...you know, what I was going through. So it wasn't, it wasn't very nice at all. It was totally different from what I'd expected and what I'd hoped for. I'd gone to all the ante-natal classes, (M) had come with me, and we'd planned on what we were going to do. And that she was going to nurse as soon as she was born. So you know, nothing sort of - I had to be coaxed into it. I just wasn't interested in having her, and it was a horrible sort of feeling.

When wimmin go into hospital to give birth the routine treatment of "patients" and the associated expectations and constraints of the sick role exerts an overwhelming

pressure to submit to the authority of the medical staff.

(2) Becoming "Patient" - Enforced Passivity

When a pregnant woman becomes a patient she is transformed from an active agent into a passive role. In the hospital institution there are certain expectations of the patient role which pregnant women are unable to escape, despite the fact that pregnancy and childbirth are not illnesses. The expectations held of the patient include the following: (1) that she is 'relieved' of responsibility for herself, (2) that she is incompetent to handle the problem at hand, since by definition lay people lack medical expertise, (3) that she is obliged to seek out technically competent help, i.e., a doctor, and (4) that she must submit to expert authority.²¹

Conditions have improved in hospitals in this country over the last decade, although with the present political and economic situation this may be short-lived. Some women do have positive and rewarding experiences of childbirth in hospital, but there has been no real lessening of the mechanisms of control in the medical institution.

Six years ago the head of the Timaru Hospital medical staff committee made the following statement.

*Women would be well advised to leave their intellects behind them when they are admitted to a maternity hospital...Otherwise they become anxious and this leads to problems in delivery.*²²

A member of the same board further commented.

A patient has no right to say what position she will be most comfortable in or whether she is going to have an induction or not. Most of them wouldn't even know what an episiotomy is.

Possibly these doctors would like to perform lobotomies at the same time. I now look at the power of the expert to intervene in childbirth.

(3) The Politics of Medical Intervention

As childbirth was subordinated to male control wimmin's reproductive organs were subsumed under the definition of 'diseases', which thereby justified the treatment of all wimmin as potentially sick. The very alliance of obstetrics and gynaecology (childbearing and wimmin's diseases) suggest the abnormal. But disease is not a neutral concept, it is defined within a socio-political context. In this way intervention in child birth is associated with the medical conceptualisation of disease.

*[W]hen doctors or other people label something as a disease all they are really saying is that they regard medical intervention as appropriate.*²³

It is estimated that between 90 to 95% of child-births are uncomplicated, but the medical experts have transformed birth into a medical event, into a potential crisis situation warranting surgical intervention. Medical technologies are used routinely, not only for the 5 to 10% of deliveries that are complicated and in which intervention may save lives, but also for many of the 90 - 95% of births in which intervention is unnecessary, given adequate ante-natal and delivery care.²⁴

In 1975, the American College of Obstetrics and Gynaecology claimed that while childbirth is a "normal physiological event", it is so full of potential danger that all births should occur in the hospital.²⁵

Two features dominate the concerns of the medical profession, the expertise and technical proficiency of the doctor and the well-being of the baby. Somewhere in the social process, the woman as active agent disappears.

Nola felt incidental to the delivery of her child.

Nola: They just didn't care, didn't have time to care I s'pose. So I was just, sort of, flat on my back, up in stirrups, you know - with them all crowded round, and (M) just shoved in a corner. And it was...very surgically done, you know. There was nothing very pleasant about it. There was nothing maternal or, we weren't involved. We were just the parent and the father sort of thing...they just had to get her out as quick as they could and in doing so they didn't care a hell of a lot, or didn't have time to care as to what they did to me. So I had three hours of surgery after she was born.

In most women's experience the decision on whether or not to intervene surgically is made without their consultation. Often the choice over routine treatment is withheld.

Carol: I had that injection to relax you which I would never, ever have again. They come round and offer it to you, only I didn't even have a choice - they put it in my bottom before I had a chance to say anything.

Carol was capable of making her own decision but she was denied the choice. Childbirth is not only treated as a disorder, women are treated as if they were infantile.

Eve's description of her feelings as she was taken away for a caesarian operation epitomises the powerlessness many women feel.

Eve: I felt like a sheep being carted off to the freezing works. Sort of down this passage to an operating theatre, and sort of shoved onto this table. I really was expecting someone to cut my throat. That's how I felt, I just felt totally out of control.

The medical institution's monopoly of health care contains a contradiction that exerts extreme pressure on women. Despite the small percentage of deliveries that

actually require highly sophisticated technology, few women who want a child are prepared to take the risk of giving birth without adequate medical back-up services in case of complications. In this country, there are no adequate back-up services outside of the hospitals. I now discuss obstetric technology in more detail.

(4) Technology as Social Relations

Women's concern for the safety and well-being of the child is the strongest contradiction that compels them to submit to the male expert. The exploitation of this concern results in almost certain compliance with the management of their delivery.

Mary had two children in Scotland. She lived in an area which was serviced by a flying-squad but she was ambivalent about whether or not to go to the base hospital.

Mary: There is always that feeling - should I go there just in case, because, well, I found that I was very reluctant to go, but I was scared not to go because you just don't know. I mean if it was a breach and something happened you'd never forgive yourself. That is a real dilemma, unless you're very, very confident. But I couldn't do that, I just felt that I couldn't take the risk, no matter how small it was - I just wanted to make sure it was going to be alright.

Gay wanted to have her children at home but was also trapped by the real fear of something going wrong in the absence of an adequate back-up service.

Gay: I wish to hell I'd had my kids at home but I was too scared then, and like, you know - that if you don't go to hospital and something goes wrong, you will be responsible. And there isn't a good back-up service in Christchurch. You know, they say you must have your baby in hospital, it's really difficult. Especially when you've got another human being to worry about - you know, you want to do the best by your baby.

This worry, "to do the best by your baby", propels women into the hospital institution where the medical services are available, if required. But once they are in the hospital they are more or less powerless to prevent the male obstetrician taking control.

The concern over present day obstetric practices is presented in medical terms as a debate over the efficacy of various technologies. The central concern revolves around "iatrogenesis", a term popularised by Ivan Illich, to denote illness which is caused by the practice of medicine. However, as Shelley Day points out, this view neglects the fundamental politics involved.²⁵ She claims that by treating particular practices as medical problems, the power relations embedded in the technology are reified as medical issues. When I examined the means of contraception I argued that the social control of fertility assumes the form of technical and individual problems over specific methods of contraception. The same process occurs in the control of childbirth.

Medicine essentially deals with relations between people, but it does not always appear that way. Through fetishising technology the social relations become bound to things, and appear as things.²⁶ Because the debate over obstetric practice occurs at the level of the medical effects of technologies, the answer is found to lie in more research, more sophisticated technology and ever increasing medical intervention. Efforts are now being made to intervene at an earlier stage, in the antenatal period. Amniocentesis is an example which highlights the political essence of all technology. Originally the intent was to

detect severe mental and bodily disabilities of the fetus but a 'by product' is the determination of the sex of the fetus.²⁷ In many countries this has resulted in the tendency to abort the fetus, irrespective of its health, if it is female. China and India are two examples where the practice is growing, but it will occur in any society in which males dominate and female life is less highly valued.

Obstetric practice is viewed as a neutral technical process, but technology is never politically neutral. An American obstetrician voices the 'medical' concern with the introduction of new technologies.

*New treatments have been grafted onto medical practice - treatments that were largely developed by trial and error, were never carefully evaluated, and remain largely unproven. Some interventions were often so dramatic in their benefits, compared to what was already being done, that they tended not to be evaluated. Now we seem to be in a situation where we are adopting technologies with small marginal benefits in comparison with what is already being done, and these tend not to be evaluated either.*²⁸

The dominant concern is always seen as the benefits or risks produced by particular techniques. The power relations responsible for their creation and use are disguised by what appear to be technical issues.

The justification used for the increasingly routine use of obstetric intervention is the effort to reduce perinatal mortality. However, it has become clear that medical intervention has had only a small impact on the statistics, because the primary mechanism behind such mortality is social class.

(5) Class, Race and Health Care

The ideology of maternal and infant care in this country claims "social welfare of the greatest number".²⁹ The reality is that in capitalist society, those with the most money get the best care, and those with the least money, and the greatest needs, will get inferior care, or none at all.

Research undertaken by the Health Department in Wellington shows that in the urban and suburban areas where the numbers of women and infants classified as "high risk" were the greatest, there were fewer health services available and they were of a lower standard than in the areas where health risk was lowest. For example, Kenepuru, the hospital servicing the Porirua area, has no antenatal education programme, and antenatal services are minimal.³⁰

Forty years ago this country had one of the best records of perinatal mortality in the world. However, in the 1975-78 period, of 23 OECD countries, New Zealand rated 9th in the neonatal group (babies aged from birth to one month) and last in the postnatal group (infants aged from one month to one year).³¹ The problem is not medical, but lies in a society organized on class and race privilege. Maori infants are dying in alarmingly disproportionate numbers to white infants. The cause of death is political, not medical.

Gisborne has the worst rate of perinatal mortality in the country. In the 1975-78 period the infant death figures for Gisborne "plunged right off the area of OECD comparisons and placed Gisborne among the rates of the poorer developing countries".³² Maori babies are dying at a rate of 50% higher than white babies. A Maori woman from Gisborne, Josie Keelen,

commented that to focus on the perinatal mortality rate is missing the point.

*[W]e're missing the point of the prenatal care of the mother, which is far more important in terms of health. What was the state of health of the woman (1) before she became pregnant, and (2) while she was pregnant? That could have a great deal of bearing on the forming of the child as well as on its birth and immediate aftercare. We don't have good care of women before they get pregnant and during pregnant.*³³

Mako Reweti Ngata commented:

When I was working at Watties there were women there who were hapu [pregnant], and they tried to work for as long as they could. You imply that they have a choice, but a lot of our Maori women have no choice. They stayed at Watties as long as they could because sometimes they were the sole provider for the family, and they had big families to provide for - basic things like kai, clothes, pay the bills.

Asking why babies are dying, in a medical context, is the wrong question. It is not a matter of birthing methods or obstetrical equipment but of poverty and the racist class system responsible for the poor health of Black and lower class people.

The allocation of funding for expensive equipment required in only a small proportion of deliveries and the inadequate resources channelled into basic preventative care reflect the priorities of the medical profession and the corporations involved in the industry. "Medicalising" childbirth has generated a highly lucrative industry.

*Drugs, devices, and instruments besiege us - to block or ease conception; to foster or terminate gestation; to monitor or hasten birth. And recently emerging uses of technology include the design of progeny to meet specifications, as well as the creation of embryos outside the human body.*³⁴

Huge sums of money are spent on the development and marketing of these technologies and huge profits are made.

Those directly involved in the consumption and effects of the business, wimmin, are excluded from the decision-making, denied access to research findings and are fed false information in the form of company publicity, which dominates medical journals. Standard obstetrical practices have often been established on the basis of single-case anecdotal reports, although they are introduced as if the benefits have been proven to outweigh the risks. One example is ultrasound equipment.

Despite the widely held assumption within the medical profession that the "efficacy, safety and technical superiority" of the routine use of ultrasound equipment has been proven, the claim does not rest on scientific testing.³⁵ Randomized controlled testing has not been carried out to assess the usefulness of the routine use of ultrasound, as opposed to traditional methods of examination, including a woman's self evaluation of the gestation length and well-being of the fetus. A woman's opinion about her own condition is disregarded because she is not an "expert". It is the allegedly "scientific" nature of highly advanced technology that fetishises the control of the male medical expert over wimmin, and yet when such techniques are investigated, it is often found that scientific methods have not been used to assess them. Probably the worst example is the electronic fetal monitor, EFM.

(6) Foetal Monitoring - Confining Wimmin

Sandra Coney's analysis of EFM indicates that the only major short-term study on whether foetal monitoring actually saves babies' lives revealed no difference in

infant health for electronically monitored and manually monitored "high risk" babies.³⁶ EFM is an example of how technology which has been inadequately tested can, once in use, generate the need for increased surgical intervention, and be dangerous for both the woman and infant when used unnecessarily.

The EFM was devised to monitor the fetal heart rate and display it on a screen. It requires a woman to lie very still in the supine position with electrodes strapped to her abdomen. As I mentioned earlier, the lithotomy position can adversely affect the fetus by reducing the supply of oxygen. Some monitors record the intensity of the uterine contractions and the fetal heart rate by way of ultrasound, or echo sensors strapped onto the woman's abdomen with belts. For internal monitoring a catheter can be inserted into the uterus to measure the uterine contractions, and electrodes attached to the baby's scalp by metal clips to measure the fetal heart beat and blood acid levels.

There are a number of risks involved in the use of EFM. For the labouring woman there is an increased risk of infection of the uterine lining and of fever following delivery. The risks to the baby are infection, damage to the scalp and haemorrhaging.³⁷ The most serious consequences of the routine use of EFM has been the marked rise in caesarian sections. The study cited by Coney showed that the rate of caesarian deliveries was 16.5% for the electronically monitored group and only 6.8% for the group monitored manually.³⁸ This increase is partly attributable to the misuse of the equipment, where the doctor makes a false diagnosis of fetal distress and whisks the woman away for

unnecessary emergency surgery.

There is strong evidence to suggest that fetal distress is often medically induced: by fetal monitoring, by the artificial rupturing of the membranes, and by labour inducing drugs and sedatives.³⁹

The charge made by Elizabeth Nihell in 1760 against "male midwives" is still levelled by midwives today, that they do not allow the birthing process to take its course. A British midwife comments on the obstetrician's tendency to perform episiotomies (the surgical cutting and suturing of the birth canal, ostensibly to prevent its 'tearing' during delivery).

*Sometimes I think they're scissor happy. Some stretch easily and its a shame to spoil them. I'm not too keen, it's too rushed. I'd rather give the mother more time to see if it stretches on its own. Everyone is so rushed these days. They always want to hurry it up. Just don't want to wait and see.*⁴⁰

The doctor has control over the timing of the delivery and this gives him enormous power to intervene and to control the entire birth process.

Equipment such as EFM can cause immense distress to the labouring woman and her fetus. Environmental disturbances are known to prolong labour. Fear affects uterine mobility and the flow of blood.⁴¹

Kim: They had a monitor on me which wasn't working, which was bloody ridiculous - to monitor the contractions. And every time I had a large one the bloody thing said nothing. And then every time I had one I could handle very well - it was way up the charts.

"Ooh, that was a big one." The staff would say. Well no, it wasn't, I mean I should know! That one didn't feel twice as bad as the one before type of thing. So I said "For goodness sake, take it off." And then of course it crapped out altogether and the thing they had on the baby, from the inside,

the lines stopped and I thought "God, my baby's dead". So they took it away. It was hopeless, it wasn't working. All it was doing was worrying me because I was watching it. And of course it wasn't doing what it should have been doing.

Eve had a similar experience.

Eve: Some nurses tried to put a fetal monitor on me to see if the baby's heart was alright, but the monitor wouldn't work which was quite reassuring! So they didn't get any results, so they gave up.

A recent British Parliamentary Report on Maternal Care, the "Short Report", proposed that every delivery be electronically monitored. This paper provides one of the major background sources for the New Zealand Maternity Services Committee Report.⁴²

Another example of the way in which wimmin are inadequately prepared for hospital delivery is the failure of the medical staff to explain the complications caused by drugs. The chemical induction of labour (oxytocin and prostaglandins) results in twice as many wimmin having analgesic drugs, which impair their ability to push, and it increases the likelihood of a forceps delivery.⁴³ Failed induction substantially increases the incidence of ceasarian section.

The procedure of inducing labour has not been carefully evaluated, it involves considerable hazards. It is generally disliked by labouring wimmin, and yet it came to be widely and uncritically used by obstetricians. In 1960 a British obstetrician claimed that:

[O]ur investigations suggested that there is much to be said for induction of labour to avoid the risk of placental insufficiency which increases with prolonged pregnancy and that this policy had led to a big decrease in unexplained and asphyxial deaths, and those from birth trauma.⁴⁴

These observations encouraged other obstetricians to increase the proportion of inductions. Studies have shown that the increase in the number of inductions has contributed little to the fall in the perinatal mortality rate. Nevertheless, a survey of obstetricians found that most of them believed that it had done so. The unifying thread in the application of all these techniques is that the medical experts never ask wimmin giving birth, those doing the work and accumulating experience and self-knowledge, for their opinions. Because wimmin are not the experts on childbirth, according to those who hold the monopoly, their opinions are invalid because they are 'subjective' rather than 'scientific'. This is one of the weapons^{which} patriarchy consistently uses to control wimmin.

The effect of the unscientific development and application of medical technology, in terms of the general increase in the use of anaesthetic and analgesic drugs, has been a higher rate of neo-natal jaundice, sucking problems and a higher incidence of preterm babies with associated problems such as respiratory distress.⁴⁵ Many of the fetal effects require immediate treatment in the neonatal unit, which means the woman and child are separated, often impairing the establishment of breast-feeding. And the failure to properly inform wimmin of the side effects of various drugs and techniques often means that wimmin interpret problems encountered after birth as signs of their own inadequacies. Eve felt responsible for the baby's health problems that were actually medically induced.

Eve: When I tried to put him to the breast he wouldn't suck and they said "Oh, that's because you've got inverted nipples". And I sort of felt, my body's failed again. I'm not built

to breastfeed. So there were all these crashing defeats one after the other [Eve is referring to having a caesarian section]. It turned out later, the reason why he wouldn't suck, was the effect of the induced labour; the drugs I'd been given and the treatment he'd been getting in the neonatal ward, as well as the jaundice which made him sleepy. And a baby that is sleepy, drugged and jaundiced doesn't suck very well. So it was really nothing to do with me.

If the medical staff had explained the consequences of the surgery and drug treatment to Eve, she would not have been put in the false position of blaming herself, of feeling guilty and responsible. The point is not that women should do without pain relief if they want it, nor without the emergency back-up system, but that they are not informed of the conditions in which they are likely to deliver. Without the necessary information, they are unable to make decisions confidently, to challenge the doctors power and, to take effective control over delivery. Women are forced to be dependent upon the medical staff.

(7) 'Twilight' Robbery: Second-Hand Birth

One of the most horrific features of male-controlled childbirth is the practice of obliterating a woman's consciousness of the birth. This can be seen as the logical culmination of the process whereby the agent of reproductive labour is stripped of social power and subjected to total control by the male experts.

Dorothy: I was totally out of it when I had Brian. I even remember what I went through. I can remember him being born, but that's all. They had to slap me around to try and get me to hold him. Slap around the face. "Here's your baby." Whaaat???

Dorothy felt good about her second delivery, she "fought the sleeping pill," and had the baby with her immediately

following the birth. Her determination to fight the drug was a response to her first experience of childbirth -

Dorothy: I was determined - they said, "You need a sleeping pill Mrs X," and I said "No". And I fought the sleeping pill, I wouldn't go to sleep at all, and I wanted her as soon as the next feed, to feed her myself. I don't know if that's got anything to do with it, but with Brian I never got that bonding bit, I never got to hold him straight away, until about half a day later. There's a lot of antagonism between him and I. We clash terribly. With Kate, we get on quite well, even though we're both females. And also with the first born - they gave me a shot of this pain killer and so many people are allergic to it and I was one of them - and they sort of walked out of the room and I nearly stopped breathing (laughing). I don't know if that's got anything to do with it..you know, I can't remember hardly any of it. (M) will say: "You said this is what happened." But I just can't remember what happened. It wasn't a horrible birth it was just hard. Um, perhaps a wee bit of a bad experience. I was just unlucky.

While Eve was "fading in and out" she lost touch with what she was doing.

Eve: The next thing I know I was being totally out of it and hearing this baby cry, and I was so out of it I said, or thought I said, I don't know: "What the hell is a baby doing screaming its head off in here?" And the nurse said, "Hey that's your baby". And I thought, "Oh shit, that's what I'm doing here, I'm having a baby!"

The use of pain relief in childbirth has been an ambivalent development for wimmin, having both liberating and repressive elements. Historically, childbirth pain was viewed in Judaeo-Christian theology as a punishment from God.⁴⁷ The Romans called it poena magna, the great pain. But poena also means punishment. It was not only expected that a woman had to suffer giving birth, but that she must suffer passively.

In 1591 a midwife, Agnes Simpson, was burned at the stake for attempting to relieve childbirth pain with opium or launum.⁴⁷ In Scotland in 1847, a doctor showed that

contractions of the uterus would continue even if a woman was unconscious. He experimented with chloroform. The church was fiercely opposed to anaesthesia in childbirth, interpreting the development as the lifting of Eve's curse.⁴⁸ The eternally suffering and suppliant mother was integral to patriarchal religion. [Patriarchal religion is predicated upon the denial of real female childbirth, somehow the male deities reproduce themselves, although females are occasionally used as vessels. Theology legitimates male control of reproduction.]⁴⁹

In the early 20th century various forms of anaesthetic were developed specifically for childbirth. "Twilight Sleep" was used widely until it was discovered that it had a highly toxic effect on the infant. It was a combination of morphine with an amnesiac that obliterated the woman's memory of birth altogether. Judith Leavitt argues that while in retrospect it appears as if women who wanted "twilight sleep" sought to cede control of their delivery to the doctor, the movement was led by middle and upper class women who wanted women to be able to choose the kind of delivery they desired.⁵⁰ The contradiction is real.

In the hands of the male profession, women were rendered totally passive, leaving the doctor in absolute control. Adrienne Rich comments "the labour room became an operating theatre, and childbirth a medical drama with the physician as its hero."⁵¹ The desire to alleviate pain can place women physically at men's disposal. The problem lies in the control of the pain relief, and thus in the power relations of reproduction.

One of the most effective methods of undermining women's capacity to fight patriarchy, and one which is

constant throughout the social process of reproduction, is separating wimmin from each other, from female support networks. In the hospital situation, this process is extremely effective.

(8) Separating Wimmin - Control Through Social Isolation

The pressure to give in to the medical authorities is constant throughout the hospital stay, beginning with the routine of the admission procedure. The separation from supportive companions, the labour rituals (pubic shave, enema) the hospital routine and regulations, the uniformed and impersonal staff, the antiseptic environment, the electronic hardware in the delivery room - these features transform childbirth into a medical event and compel wimmin to submit to those in charge. But the process is at work before the birth. The expert hoarding his expertise and distancing wimmin from each other.

Legitimate knowledge is that which is offered by the experts. Patriarchal power in the form of the doctor invalidates wimmin as a source of knowledge.

Why do women have to recount such stories to one another, especially when the majority of them are so untrue?...Probably more is done by wicked women [witches?] with their malicious lying tongues to harm the confidence and happiness of pregnant wimmin than by any other factor...Perhaps it is some form of sadism.⁵²

The ideology of pregnancy is that wimmin are emotionally unstable, childlike and impressionable, to be warned against the "malicious lying tongues" of other wimmin. In a textbook of obstetrics, Dr. Stuart Asch wrote that pregnancy will:

*[S]hake the most mentally healthy person. Thus one finds that some manifestation of anxiety is always present during pregnancy. In the most serious reactions this can take the form of any possible psychiatric picture, including phobias, depressions, and psychoses.*⁵³

He claimed that it is logical for pregnant wimmin to resent their condition, since pregnancy "gives us [sic] pain" and "makes us ugly". Another doctor writes of the "childlike suggestibility of the pregnant woman". On this ideological view of pregnancy, wimmin are to be guarded and protected, from themselves and from each other. The ideology is grounded in real conditions, but what makes wimmin vulnerable is the social process. Childbearing is exhausting and demanding work but it only becomes a source of social weakness under patriarchal control of reproduction.

Inside the hospital wimmin are physically isolated from their familiar support networks. Carol could not understand why her sister was not permitted to be with her during labour.

Carol: I had my sister there in the waiting room all the time. They wouldn't let her in the theatre. I thought it was silly because she had had two children.

Gay had wanted her friend Jane to be with her during childbirth, but Jane was ordered out of the theatre the first time. The second time Gay gave birth she was determined that it would not happen again.

Gay: I was stronger you see, I'd got more assertive. I was stronger and they obviously saw I was pretty determined. I didn't want a fight, I mean, I was having a baby! I didn't want to bloody fight them and become the "naughty patient" who doesn't do what its told, and the nurses down the corridor whisper about you - "that difficult patient down there". I didn't want to become "the difficult patient".

Why is the male practice of isolating wimmin in child-

birth from the contact and support of other wimmin imposed with such force? For patriarchy to maintain control over childbirth it is necessary to prevent wimmin from congregating together, from sharing their experiences, from discovering common grievances and from discovering within their numbers, the power to take on the medical profession and take back control of childbirth. The process of separating wimmin, at every stage of the reproduction process, prevents the development of political solidarity by ensuring that wimmin are weak in their individual isolation. The historical destruction of the support networks of female healers and midwives exemplifies this process, which culminates in the incredible phenomenon of men taking credit for childbirth.

(9) "Real Men Finish What They Start"

In a study of the treatment of wimmin in gynaecology textbooks, Diane Scully and Pauline Bart discovered that the literature "revealed a persistent bias toward greater concern with the patient's husband than with the patient herself".⁵⁴ The 'right' to have the biological father in attendance during childbirth was a long struggle, but the victory was an ambivalent one.

The inclusion of the biological father in the delivery room has resulted in the tendency for the male expert to award the male partner an active, authoritative role he did not previously have. Consequently, patriarchal control over the woman, who is the reproductive worker, has intensified. The medical profession's concern with the non-reproductive worker has been associated with the promotion

of types of analgesic that make the man's experience of childbirth more pleasant. Some of the wimmin I interviewed, who had their partners with them, were not properly conscious during the birth. This gives the male partner the power to record, interpret and pass onto the womin his account of the birth. Carol's partner was with her during her second delivery.

Carol: Oh he was over the moon - but he's that type of man, into first aid. He was good, because, oh, I don't know what you'd call it, but I knew nothing, I didn't even see her born, which I was disappointed about. But he could describe it to me afterwards.

The participation of the partner in the delivery has subtly deepened the contradictions in the social relations. It exploits the real need wimmin have for constant support from a familiar and trusted person, because in the same process as providing a form of support, it increases the womin's dependency on males. The crusaders for a new, liberating, "natural childbirth" have been predominantly male and they have increased male power over childbirth.

In the 1940's, Grantly Dick-Read "bravely pioneered" a new "natural childbirth method". While some aspects of his method were progressive, in that they countered the trend toward surgical intervention, his method is essentially patriarchal. Read observed that pain sensations arise out of fear and tension [as well as pain] and began training wimmin to breathe, to understand the stages in the labour process and to develop muscular control through exercise. He placed great emphasis on the presence of calm supportive birth attendants. While he believed that anaesthetics should always be available, he opposed their routine use. Read encouraged the 'participation' of wimmin in childbirth, but

only under male control. He wrote of the "inborn dependence of women" which finds its "natural" outlet in dependence on the male doctor.⁵⁵ Margaret Mead has an astute analysis of this kind of "natural childbirth":

*It should be pointed out that natural childbirth, the very inappropriate name for forms of delivery in which women undergo extensive training so that they can co-operate consciously with the delivery of the child, is a male invention meant to counteract practices of complete anaesthesia, which were also male inventions.*⁵⁶

In the Lamaze method, the male partner is taught to monitor the labour and instruct the woman in breathing. In the "husband-coached childbirth" method the male becomes the expert by adopting the doctor's role of programming the labouring woman for delivery. In a film on Lamaze instruction the male partner (the non-worker) is shown conferring with the medical expert on whether or not to 'permit' labour to continue or to intervene to hasten it.

The most explicit patriarchal method of this type is the approach taught by Robert Bradley. Exercises and classes for both parents begin early on the pregnancy (all of these men erroneously assume that a supportive male partner is available and that women are in a 'legitimate' relationship). In Bradley's method the active, purposive and heroic role is awarded to the male. From the woman he requires submission to male judgement.

*Our men are real men. They finish what they start - pregnancy, and their wives look up to them with respect, love and affection...*⁵⁷

Bradley, more than any other obstetrician, has perfected the political transformation of childbirth from a female activity and experience to a male achievement. The woman is forced into dependence on males, not only on the doctor

but on the male partner, who has not performed any reproductive work (apart from donating sperm) but who takes the credit.⁵⁸

4. Summary

The political transformation of childbirth from a female centred activity to a male controlled medical event involves wimmin in powerful contradictions. Because the medical institution has the monopoly of health care resources and skills, wimmin have no choice but to seek care in the only form in which it is made available to them.

At the moment of childbirth, wimmin are institution-alised as "sick" people, their physical movement is confined, they are often placed on their backs, sometimes with belts strapped across their bodies, and sometimes they are rendered entirely passive with drugs. They are denied essential information about the possible conditions of delivery, and are inevitably set up for internalizing guilt and feelings of inadequacy when childbirth falls short of the idealized version in the textbook. They are separated from other wimmin, from the support that is necessary for them to fight for control. They are made dependent upon males who take charge and ultimate credit for their achievement. Wimmin are isolated at a time when they are least able to resist domination. This process is constant throughout patriarchal reproduction.

The social relations of childbirth are both patriarchal and capitalist. They are disguised by the ideology of social and political practices as technical, medical problems. This conceals the reality that medicine

deals with unequal relationships between people, and not things. And in a similar manner, patriarchal ideology conceals the real relations underlying childbearing, that pregnancy and childbirth are not essentially about the relationship between wimmin and children, but between men and wimmin. In the next chapter I investigate the power men have to escape childcare labour. Wimmin are forced to submit to male demands and control in childbirth. The unequal power, which is established at the most fundamental stage of gestation, is carried over to the division of labour in birth as well as childcare.

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CHAPTER FIVE

THE SOCIAL RELATIONS OF CHILDCARE

1. Introduction

Wimmin are the childcare workers under patriarchy. They are not born with the necessary skills and knowledge, but acquire these because they have no real choice. The "choice" is either to have children and raise them or not to have children, because men are not childcare workers. Men are not born incapable of looking after children, but are able to escape the work because they have managed to organize the production and reproduction of real life in their interests. Although men do not benefit equally from male privilege, just as wimmin do not suffer equally from oppression, between male and female a fundamentally unequal power relation determines the division and practice of childcare labour.

Childcare labour is socially necessary work: it is essential for the survival of the species. In patriarchal society, childcare involves two fundamental processes. There is the work process, which involves attending to the needs of the young who are dependent upon adults for food, shelter, clothing, and the socialization such as language, that will transform them into human beings.

There is nothing in the work process itself that determines how children will be raised, or by whom. This is the outcome of the social process, and under patriarchy

this takes the form of "mothering". The only constant feature of the work process is the dependency of the human young on adult care.

The social process dominates the work processes in that social relations determine how the work will be organized and maintained. It involves a political relationship, not between women and children or between men and children, but between men and women.

The two processes must be clearly distinguished, otherwise the real relations of "mothering" remain concealed. If the distinction is not clear it can be made to appear as if the people caring for children are being attacked, rather than the political system responsible for the gender division of labour. Or it may seem that the actual work of parenting is being devalued or dismissed, which plainly it is not. The object of the thesis is to focus on the system of power relationships and conditions in which the labour is carried out and to support the women doing the actual work. "Mothering" is not parenting, it is the social form taken by that work in patriarchal society.

Childcare labour is the most concrete "moment" in the social process of reproduction. The mechanisms are not simple, they are complex and the social forces they generate combine and contradict at many levels. When I discussed the method of abstraction I quoted David Harvey's explanation of how the method entails looking in upon the inner structure of capitalism (in this case patriarchy) from different "windows".

*The view from any one window is flat and lacks perspective. When we move to another window we can see things that were formerly hidden from view.*¹

At the moment of childcare, suddenly the view incorporates all of the windows and the resulting perspective is dense and overwhelming. At this level, the forces are generated by many different mechanisms, in fact the picture that emerges is of the total social relations. For this reason there must be quite rigid cut off points, to keep the analysis within manageable proportions. Many aspects of the wider social organization cannot be examined here, but they play important roles in the overall construction of patriarchal reproduction in capitalist society. For example, there are the activities of the various state agencies, such as the police and the welfare institutions, and the structure of capitalist production, the organization of the wage system, and so on. Some can be touched on, but only briefly.

The goal is clearly to distinguish the work process of reproduction from the patriarchal social process. I examine the social form of parenting, looking at the practice of being a female parent in this society. Then I examine the social processes responsible: the spatial separation of the reproductive from the productive work sites, the power of the male wage and the resulting dependency of women, the lack of formal childcare facilities, and the social isolation in which women are compelled to live. The material conditions generated by these mechanisms are the foundation of male social power.

2. The Ideology of "Mothering": Brute Instinct Versus Male Expertise

The ideology of "mothering" contains many conflicting beliefs but the strongest contradiction is between the idea of naturalism and the belief that male expertise is necessary for wimmin to become "good mothers". The sociobiological thesis of naturalism has been discussed, but I will briefly restate the position, as expressed by the 19th century philosopher, Herbert Spencer.

Spencer claimed that nature must have fitted the two sexes for their social roles, wimmin as childcarers in the private sphere and men as workers in the public domain. He believed that wimmin have been biologically equipped with the "parental instinct".² The instinctivist view that wimmin are genetically fashioned for childcaring continues to prevail today in numerous forms, despite the currency of the opposing view that wimmin must be trained to look after children by experts.

The rise of the childcare expert reflected the growing power of the expert in other areas of wimmin's lives. The male takeover of healing and childbirth weakened the communal bonds among wimmin and established the power relationship and model for professional male authority elsewhere. However, as Ehrenreich and English observe, the experts were not entirely uninvited.³ In the settler colony, as in America, many wimmin welcomed the rise of the male expert on childraising.

In this country between 1890 and 1920, the cult of "scientific mothering" and "home science" took hold of the white middle classes. The male medical profession was at

the forefront of the movement providing the justification for the increasingly rigid gender division of labour based on biological difference. The medical experts insisted that "motherhood" and domestic labour could not be undertaken by untrained wimmin.⁴ They helped establish organizations to provide wimmin for the expertise they presumed was required. The Plunket Society was set up in 1907. "Home Science" was established as a university subject, and in 1919 "Domestic Science" became a compulsory course for female school students.

*Mother became the cult figure, her temple the Home. She became by definition a moral redemptress, a figure of purity and chaste love, the home a place of refuge and moral elevation.*⁵

The movement to establish "true womenhood" on a scientific basis was supported by a diverse group of people: feminists, prohibitionists, educationalists and the medical profession. The appeal to wimmin is understandable. The social movement signalled a rejection of the belief that childraising was a matter of "brute instinct". Even though it marked an intensification of male control over wimmin's lives, the latter were actively attempting to win back this control.

The movement shows how each social development brings forth a fresh set of contradictions, or a reconstitution of old tensions.

The "industrial" approach to childraising aimed to rationalise and standardise childcare practices, to "bring the home into harmony with industrial conditions".⁶ The prevailing expert opinion of the time was that wimmin should regulate children's behaviour "scientifically". Behaviourism

was the dominating methodology. Exact schedules were devised for waking, sleeping, feeding, bathing, bowel movements, and so on. Spontaneity in children was to be repressed and controlled, and "moral laxity" was to be extinguished in infant behaviour before it could take hold. "The rule that parents should not play with baby must seem hard but it is no doubt a safe one."⁷

The idea that "motherhood" was a profession completely contradicted the established ideology. It was an admission that biological instincts do not provide a practical guide to parenting. The behaviourists saw the child as raw human material which could be hammered into the right shape by a trained mother. Parenting was now a matter of "technique" rather than instinct. The movement was middle class, but through organizations such as Plunket the ideas became widespread.

However, by the 1920's the "industrial" fashion in childraising was on the wane. The next major wave of male advice to women represented a 180 degree turn around. Children's behaviour was no longer to be regulated since the new theory was "permissiveness".⁸ Crying babies were not being manipulative, as was previously thought by the experts, but were responding to specific needs. The "new mother" was to devote herself to meeting those needs.

The essential premise of the permissive approach was that the female parent must provide love within a "stress free" environment (this criterion alone must have placed immeasurable stress on women). Each childish pursuit and action was to be met with loving encouragement.

The experts had arrived back at the thesis of

naturalism. A woman's love for her child was seen as a force of nature, an innate aptitude. Psychoanalysts began flooding in to this area of male expertise. The healthy "real" woman would find her own fulfillment in meeting the needs of "her" child. She would rejoice in her pregnancy, in breastfeeding, and in the rich companionship of her child.⁹ Childraising was no longer a duty or a profession, it was the "natural" calling of real women. This reformulation of the contradictions of patriarchal childcare increased women's vulnerability to the power of the experts, while the activity and power of men were buried beneath the renewed romanticization of the "maternal bond".

The return to the theory of instinctive parenting enlarged the power of patriarchy to blame women for social disorder. If the child had problems, if things went wrong, it was not the "technique" of the female parent that was at fault, but her defective instincts. The mental health experts were constructing a sophisticated picture of the mental (ill) health of females. According to the psychoanalysts, what really mattered was not what a woman read or thought she was doing, or even did, but her "unconscious motivation". And the only people who could uncover the "real" feelings a woman had toward her child, were the mental health experts. The concrete conditions in which women raised children were not considered significant. If there was a problem, the woman had failed: it was an individual problem that resided somewhere inside her head.

Ehrenreich and English comment on the "generation of psychoanalysts [who set out] to trace each childhood disorder

to a specific disorder in the mother".¹⁰ The "bad mother" was either "rejecting" or "over protective".

*It was suddenly discovered that the mother could be blamed for almost everything. In every case history of the troubled child: alcoholic, suicidal, schizophrenic, psychopathic, neurotic adult; impotent, homosexual male; frigid, promiscuous female; ulcerous, asthmatic and otherwise disturbed American, could be found a mother. A frustrated, repressed, disturbed, martyred, never satisfied, unhappy woman. A demanding, nagging, shrewish wife. A rejecting, over-protective, dominating mother.*¹¹

For no other social group has the practice of "blaming the victim" been used as effectively as against women who parent. One of the experts who has had an enduring influence on the ideology and practice of childcare is John Bowlby, with his theory of "maternal deprivation".

In Britain in the post-war period, Bowlby was commissioned to study the needs of children who had been separated from their parents, such as war orphans, children hospitalized for lengthy periods and those billeted in rural areas for the duration. Arguing on the basis of the psychoanalytic insight that early experience has a lasting effect on adult behaviour, Bowlby used his study as evidence that the more or less constant presence of the female parent is essential to the child's mental health.¹² He implied that the conditions he classified as "maternal deprivation", can occur whenever there is less than full-time, single-handed provision of care from the female parent. As a way of protecting children, Bowlby suggested social policies to prevent women from working outside the home.

There are several problems with Bowlby's study and conclusions, but the most serious aspect is his assumption that the primary caregiver must be the biological female

parent. Michael Rutter comments, "it should be appreciated that the chief bond need not be with a biological parent, it need not be with the chief caregiver and it need not be with a female".¹³ Despite the number of experts who agree with Rutter, the ideology of critical child bonding with the female parent remains. It has endured because as a matter of fact, the primary caregiver is the biological female parent. This is the concrete reality on which the ideology of blaming wimmin for children's and adults' problems rests. The consequence is that the social relations responsible for the situation escape analysis and blame.

The infinite malleability of childcare theory is shown by the changing opinions of the "experts" over time. The theories can change rapidly, from the birth of one child to another:

*I was serving a new vegetable to the boys. Suddenly I realized that I expected Peter, the oldest, to clean his plate. Daniel, the middle one, didn't have to eat it but he had to taste it. And little Billy, as far as I was concerned, could do whatever he wanted.*¹⁴

Although the childcare experts have had the greatest influence on the middle classes, their reach is all pervasive. The moralism implicit in most of the theory is widely transmitted to wimmin through their contact with health professionals. The medical institution plays an extremely important part in transforming wimin, the agent, into the social role of "mother".

One of the consequences of the rapid change in ideas about "the right way to bring up children" is that each generation of wimmin begins afresh, isolated and without

support. Their "mothers" were told something quite different, and they are pressured to conform to the latest received wisdom from the "experts". The process of separating wimmin is in operation: "don't listen to your mother or your sister". Listen to the expert, not to the community of wimmin.

The ideology of "maternal instinct" takes many different forms, but it is based on real conditions and needs. Children do need close relationships with people. Because the primary caregiver under patriarchy is the female parent, it is a short leap of logic to interpret this social relationship as the necessary consequence of the dependency of children. The ideology is grounded in concrete conditions, but it disguises the real relations of childcare, the unequal social relationship between male and female that determines the unequal division of labour.

The actual work process of childcare has no "natural" implications for the organization of labour. The situation in which the work is offloaded onto wimmin is the consequence of social and historical struggles, not biology. There is nothing "natural" about the way in which reproduction is organized by humins.

I now look at the social form of childcare under patriarchy and begin with the control of wimmin exerted on the basis of breastfeeding. Patriarchal ideology uses this activity, in the same way as pregnancy is used, to naturalise the social relations of reproduction. Like every other human activity, the practice of breastfeeding takes place within the prevailing set of power relations.

3. "Mothering" - the Social Form of Parenting in Patriarchal Society

(1) Breastfeeding and Social Control

The activity of breastfeeding has been ideologically used against wimmin to justify their exclusive association with children. Wimmin lactate, men do not, therefore the possession of mammary glands is believed to confirm the female social role of childcarer. Wimmin experience considerable pressure over breastfeeding from a variety of sources. The point is not that they should or should not breastfeed, but that they should be able to decide what to do without being made to feel inadequate or guilty.

The Plunket Society has had a major role in pressuring wimmin to conform to a set ideal of "mothering". At the same time it provides a valuable and necessary service. The fact that it meets real needs gives it enormous power to influence wimmin. Neil Begg, writing on behalf of the Plunket Society, has this to say about breastfeeding.

*Breast-feeding is a wonderful way of establishing the right relationship between mother and child. It goes without saying that breast milk is an ideal food, and with all the skill of science today, cow's milk mixtures remain merely a substitute for the real thing. Just as important as the nutritional value is the strong psychological bond which is forged by breast-feeding. To a mother who is feeling a desire to give love to her child, breast-feeding provides a sense of adequacy and fulfilment, The child learns about his mother from the warmth and tenderness and bounty of her breasts. It is the natural process, which provides for the most stable and suitable foundation for a very close future relationship.*¹⁵

To a parent who is "feeling a desire to give love to her child" but not her breast, or who is unable to breastfeed, the strong moralism contained in this message can be very damaging. At the same time, Begg goes on to say that should

the infant be "artificially" fed, "the baby will grow emotionally and physically in just the way he should". He excuses wimmin from breastfeeding for reasons of sickness and disability, and of feeding difficulties, but not of choice.

La Leche, the organization specifically designed to offer information and support to wimmin who are breastfeeding, wields ambiguous influences. It is there to help wimmin in a practical way, and many wimmin find the service very useful. However, Le Leche generates a strong social force on wimmin to conform to the ideology and practice of patriarchal "motherhood". Judith had breastfed for 14 months and is an active member of the organization.

Judith: One or two girls that have been going to the meetings have said they've stopped going because they've put their baby on the bottle. Not for the whole time, but just for a feed, and lunch time, something like that. They're really [La Leche] - they, sort of go to the extreme in some ways, they're very good, they're very helpful, but I've felt it myself, that weaning was a bit of a dirty word. I had some questions I wanted to ask about weaning Barry, because he seems to be going on and on, but, you almost feel like you don't like to mention weaning. And I think that's wrong really. Probably that's something that I just feel, you know. I don't think that's consciously their attitude. People feel awkward about asking questions about bottle-feeding or weaning because they're so enthusiastic about feeding as long as the baby wants it. I think perhaps some of us feel [laughing] that we're dipping out a bit. These two more or less said to me that they feel that they might be a bit of a failure, or that they might be seen as a failure.

Hilary was impressed by the practical help she got from La Leche, but she felt dissatisfied with the organization's attitude toward parenting.

Hilary: I used to go a lot to La Leche meetings, they were really good for support in breastfeeding, but I really used to find myself getting uncomfortable talking with them. And I couldn't work out

why. And it's because there's more to my being than meeting Susan's every need.

Hilary tried to question the view of wimmin as selfless childcarers.

Hilary: It's like a big warm blanket that very gently appears from nowhere, and I feel like it's thrown over me, and when I've quietened down it's taken off.

Wimmin are not only pressured to breastfeed, they are pressured not to breastfeed. The social and political effects of the activity and how it can be used against wimmin are revealed by the way the theory is constantly changing. One of the contradictions involved in the social control of wimmin is that breastfeeding is construed as a "natural" and necessary part of "maternal care", while the sexual objectification of wimmin's breasts makes it difficult for them to breastfeed anywhere except in seclusion.

The ideology that biological instinct will provide a practical guide for childcare is very strong. Because the work takes place in private, in isolated individual homes, there is no way wimmin can be adequately prepared for the reality of it. I asked the wimmin about the expectations they had of parenting and how they had found it in practice.

(2) Expectations and Reality

The phrase most commonly used to describe the concrete reality of parenting "learning as you go", directly contradicts the ideology. Fiona described her expectations as "romantic". Gay called hers "naive".

Dorothy: Um, well, now I look back it was completely different from what I thought it would be. You know, you get this nice little bundle, um, that goes to sleep and they wake up when they're hungry, and you don't get all the hassles in between. It's a lot more work than I thought it would be.

The social ignorance in which wimmin approach or "fall in" to parenting generates unrealistic goals.

Mary: You learn as you go along. I said a lot of things when I was pregnant, like, I'm not going to do this, and I'm not going to do that, or the other, but OH MY GOD you soon learn to keep the peace. You know, you give in and do a lot of things you said you'd never ever do... I'd always said that once they were tucked down and meant to go to sleep they were going to go to sleep. That I would never, ever give her a bottle. Well, um, she's weaned herself during the day now, she only has a bottle during the day and nursed at night. And I always said I would never ever feed after 12 months, that I didn't like seeing bigger kids go like this. Well, I'm still breastfeeding her at nights. I always said that if she woke up during the night I would get her up and change her pants and feed her. Well now, if she wakes during the night and doesn't want to breastfeed but she's thirsty I'll give her um, freshup or something like that. Well, I said I'd never, ever do that. Oh there's lots of things you say.

Kim made many plans but discovered "there's no such thing as a system".

Kim: You have all these plans when you're pregnant. Oh, I'm going to do this and I'll do the washing at so and so a time, and I'll have this done while they're down. But you're so tired, and things don't work out that way. You get a rainy day and it stuffs your washing up. You put him down and he doesn't sleep two hours, he only sleeps half an hour, if you're lucky. And it just doesn't work. There's no such thing as a system. I'm quite convinced of that. In the end I learned, you do what you have to do.

Mary comments "I don't think anybody realizes what they're letting themselves in for, you don't realize how much it's going to change your lifestyle". Wimmin not involved in the daily reality of childcare believe that it will be different for them.

Kim: My girlfriend, the one who's having a baby, she got awfully upset "Why aren't you coming to see me? When I have a baby I'm not going to let them tie me down. You never come and see me."...A while ago I sat her down and

said "Well listen, that's how I felt at the time" sort of thing. I hope I don't do it to her. I've already given her advice and I shouldn't because there's no reason why I should. I mean, "one child doesn't a mother make", so they say.

Belinda: Why's that? I would have thought it did.

Kim: Well, I wouldn't say I was experienced, put it that way, experienced with mine would be one thing, but others. I mean they're all different so they tell me. I think to myself, my girlfriend you know, she's working at Christchurch Women's herself, and she says, "I'm going to do this and I'm going to do that" and I think, no you're not. And I think you're not prepared at all. And then I think, Christ, who am I to talk, I wasn't prepared. It's just the way it goes. You learn from your mistakes. It smacks you in the face, literally.

In the aftermath of being "smacked in the face", the loss of confidence and depression that often hits wimmin is symptomatic of the disjuncture between the expectations and the reality of "mothering". I asked the wimmin what aspects of childcare work they found the most difficult. At the concrete observable level, the hardship of early childcare is the inevitable result of the dependency of children. But the power relations that determine how those needs are met, the social relations between men and wimmin, are not clearly visible.

Belinda: What do you find the hardest about being a parent?

Anita: Um, everything! [laughing] Ah, them depending on me all the time, 24 hours a day. I suppose if I had a family here, to take them too now and then. It would be really good. But, it sort of feels really hard sometimes, that I can't sort of, get rid of them for a while. Even though they go to day-care. I suppose I'd just like to have someone that I can say "Oh, I'll just drop the kids off for a while". You know.

Fiona also finds the constant dependency hard, not being able to control her own time, very hard.

Fiona: [N]ot being able to count on having the next 10 minutes to yourself, you know. Or deciding

to do something and um, all of a sudden they want something. You know, just not being able to plan really. Somebody reckoned that motherhood was like being in a concentration camp where they never let you know what was going to happen next. They'd let you go to sleep then turn all the lights on again and wake you up, then let you drift off again. You know, it's a bit like that at times, especially when they're babies.

Dorothy Smith comments "Over a lifetime and in daily routines, women's lives tend to show a loose, episodic structure that reflects the ways in which their lives are organized and determined externally to them and the situations they order and control".¹⁶ It is precisely this lack of control over the structure of wimmin's lives on a daily basis that characterizes the loss of social power wimmin experience when they become "mothers". Brenda has one child at home and one at school, and she finds the most difficult part of parenting:

Brenda: Not being able to do what I want to do when I want. I really thought I would have got over this after all these years, but I don't think I ever will, because it's just me, it's just the way I am.

The work wimmin do appears to be "naturally" determined by their makeup and by the needs of children. Regardless of a woman's attitudes to parenting, the consciousness of children's real needs underlies the contradictions that ties her to the social role of "mother". The ideology of "motherhood" is not based on consciously spread lies, it is grounded in real contradictions. Wimmin are exploited and controlled by a more or less accurate understanding of the reality of child dependency. Knowing that "it doesn't have to be this way" does not change the daily requirements of feeding, clothing, nurturing, educating and loving children. Because the mechanisms

which allocate this work to wimmin rather than to men are hidden, and the social power of men must be dealt with at an individual level in isolated situations, it actually appears as if wimmin are tied to children in a natural and inevitable relationship. I now look at the activity of men in childcare labour.

(3) "Mother's Little Helper - Father"

I asked Kim if she felt she had the major responsibility for childcare and domestic work.

Kim: No. I don't feel the major responsibility is mine. But, um, yes and no. (M) is just as responsible to the point where he'll take over when it's necessary, but um, little things he doesn't think about. He's very good, but um. I went out last night for 2 hours to help a girl do some cleaning and um, I rang up at 8.30. "Has he had his tea yet?" "I was just about to give it to him." "Oh for Christ sakes, why haven't you given him his tea, it's 8.30?"

He'd only been up half an hour, he probably wasn't ready for it but that's not the point. I think right, well, "You can pick me up in 20 minutes, put a double nappy on him, give him his drink and get him in the car," type of thing. And he gets here and he's got his winter pyjamas on, it was nearly 30 degrees last night! There's little things they don't think about, silly little things. Combing his hair, he'd never think in the morning, if I've gone out the door before he's up, to dress him and comb his hair. I come home and his hair's not been done. Stupid things, but they get right up my nose if they're not done.

The ability to remain oblivious to necessary details is a privilege. As Kim says, they may be "little" but someone has to do them. Someone has to notice when the butter is running out and there is only one toilet roll left and children's toys are out in the rain. Men acquire incompetency in attending to necessary details because the work can be offloaded onto wimmin.

Belinda: Did he do housework, when you were married?

Eve: I did most, he was a slob, he refused to wash or change his clothes or tidy anything. He always claimed to be so busy working, or on other projects that I had to do it. He'd occasionally cook a meal but he'd make such a frigging mess. He'd never cooked enough to know how to do it properly, and he'd make such a mess of the kitchen, I'd try to discourage him. He had this excuse about how washing dishes gave him eczema or something but he never thought of using rubber gloves.

As with children, wimmin generally find it quicker and less hassle to do the work themselves than to get men to do it and run the risk of having to do it again.

Kim: Oh he tries to cook, he's a lousy cook, "how long do you leave these spuds on to boil?" He tried to have some cooking lessons once but it got to the stage - I thought we'd do something simple. He was just about jumping up and down on the spot so I said, for God's sake you're making me tired just looking at you.

In the early years of childcare when the pressure of work is the most intense, patterns became established that carry over to the later years when the children are older or have left home. If it takes extra work and time to get someone else to do chores, in many ways it seems easier, at the time, to do them yourself. If a woman has a partner who is going out to work and she is at home with an infant, there is pressure on her to do all or most of the childcare and domestic labour because she is in the home, she is "available". And so it has come to be ideologically seen as the female sphere of competency. The person who remains in the workforce is bringing home a wage and this has an enormous impact on the power relationship, as I will soon explain. By the time most wimmin re-enter the workforce, the division of labour in the home has become

entrenched, and so they continue to carry the workload of childcare and domestic labour, as well as that of paid employment.

Most wimmin feel that domestic labour is their responsibility. Rosemary Novitz found that "while childcare is possibly seen as less exclusively a mother's responsibility than it was in the past, domestic work other than childcare is still seen as predominantly the mother's responsibility."¹⁷

The domestic work that wimmin do frees men to enjoy "quality" time with children. Because wimmin are compelled to assume responsibility for the dull, repetitive necessary work, men are free to be "heroes".

*Kim: He'll be at home with him and I'll come home and say "Well, what have you done?"
"Oh, we've been playing". Dishes are still sitting there, things like that. He has more - quality time with him. And I think, well, they've been playing tough, I'll do the dishes. I'll leave them to it.*

The men least involved in childcare tend to be critical of their partner's parenting capabilities. They have the least understanding of children and of the demands of parenting. It is a way of asserting control over wimmin, rather than over children.

*Carol: He thinks I'm not hard enough on them.
Belinda: How do you feel about that?
Carol: Resentful, because I have them all the time. I don't think it has anything to do with disciplining them at all. I do my best and I don't think it's fair to be criticised.*

Criticising a womin's parenting is a subtle form of control. It undermines her confidence in herself when she is the one with the experience and knowledge. The non-worker becomes the "expert" in the home.

Eve: He used to refer to the baby as "that little tyrant". He said the first rule of bringing up kids was, don't take any shit from them. Well I don't agree, there's a bit more to children than that. The day we brought him home he said "He's trying to manipulate you, you've got to show him not to do that and ignore him". He thought a new born baby was capable of this sort of behaviour and it had to be nipped in the bud. The baby was crying from hunger because he wasn't getting enough milk, but he reckoned he had to be shown.

Some men work as hard at caring for children as wimmin, but not many. The process of the male as non-worker, asserting dominance as the expert in the home, parallels the appropriation of "expertise" by men in the childcare profession. Since they are not establishing control over children, but over wimmin, the power relationship is the same. I now examine more closely the daily reality of "mothering", its contradictions and its effect on wimmin.

(4) "Coping"- Living out the Contradiction

Parenting in capitalist patriarchal society is an individual and private work process. On the basis of these material conditions, the bourgeois ideology of individualism is strong. Since wimmin are forced to "manage" alone, there are strong ideological pressures to do without help.

Kim: Pregnancy help came once, once only, and they cleaned up the flat for me when we first got home from the hospital. But um, they were marvellous, but I couldn't have them come and do my housework for me. I was very paranoid about the fact that somebody was coming in and doing it for me.

Belinda: Why did you feel that?

Kim: Well, I felt I should be able to do it, other people do it, why shouldn't I manage? I mean, next door, she did it, she managed fine.

Hilary was ill with a kidney infection at home with a baby.

She was tired and depressed.

Hilary: It was my sister in the end, rang up Pregnancy Help, and a womin, two wimmin came round first to interview me. And then one of the helpers came, and she was good value. But, um, it was very hard for me to let her come in and do my housework. And I would find that I would race around and do things [before she arrived].

The practice and ideology of "coping" on your own is part of the social process that separates wimmin, preventing the development of mutual support and political solidarity.

Belinda: Who do you go to when you want to talk about things?
Fiona: Well, I yell and scream a lot, that gets things out. I had a really good friend next door. [She moved]. She and I used to share a lot, like our frustrations of having kids and that. She's a solo mother with two kids. Um, my mother's usually quite good, she doesn't try to tell me what to do. She says things like "Oh bring them round to me, I'll look after them". I don't suppose I tend to share much with other people about the kids, about problems with the kids because of the whole idea of - if you're not coping with them you must be failing sort of thing... Sometimes mum will come in and say "where's your ironing?" or something. And I've made sure I've done it the day before.

The notion of unobtrusive competence expresses the essence of what it is and what it means to be a "mother" in patriarchal society. Hilary Graham explains how the qualities which social scientists have detected in their studies of bereavement or illness are qualities which female parents are expected to display all the time.¹⁸ Social psychologists use the concept of "coping" to name the process by which individuals survive short term set-backs.

According to Graham, coping involves two dimensions. To cope, a womin needs to demonstrate "an unrelenting concern for the physical and mental well-being of those in her

care".¹⁹ Responsibility is the first aspect, taking on the obligations and duties which go with the social role of "mother".

Secondly, coping involves culpability. I earlier explained the ideology that wimmin can be blamed for "any faults and failings in herself and her family". Graham uses "coping" to name the everyday face of "motherhood", both the activity and the ideology.

*Coping thus involves low-profile living; it involves denying your role and denigrating yourself: 'I don't know how you cope with your husband and housework and your seventeen children', 'Oh, it's nothing really. I do very little'. If coping equals self-effacement, then women can only be made aware of themselves at times of failure.*²⁰

The practice and ideology of coping is central to the social assessment of wimmin as "mothers". To be seen to be "not coping" is to be treated as a failure. Each woman I interviewed revealed the fear of "failing": "next door managed", "other wimmin cope". It is simply not true that under the conditions of private, isolated parenting in this society that "other wimmin cope". The numbers of wimmin in mental institutions and the numbers at home on anti-depressants, tranquillizers and alcohol, are evidence of the disjuncture between the ideology and the reality of "coping". Depression is endemic among childcarers.

(5) Depression - Male Power makes Wimmin Ill

The reality of being a woman in patriarchal society is inherently depressing, particularly for female parents. Married wimmin are admitted as in-patients to psychiatric hospitals at twice the rate of married men, and at

significantly higher rates than single wimmin.²¹ They are prescribed tranquillizers and hypnotic drugs at a rate which is one-third higher than that of the rest of the population.

Community studies show that between 10 and 20 per cent of wimmin experience depression after the birth of a child. This can last from one month to a year or longer.²² It is not the "blues" reaction, associated with the third or so day following childbirth, when a womin's milk comes in. The "symptoms" of long term depression include: tearfulness, anxiety, guilt, lack of concentration, insomnia, loss of sexual interest and "an inability to cope". Depression is not the product of individual failure, it is the product of the oppressive material conditions in which wimmin live and the lack of control they have over these conditions.

Ann Oakley has linked a high degree of obstetric intervention in childbirth to "post natal depression".²³ While this plays some part, the most important element linking particular forms of psychological suffering to the practice of being female in patriarchal society is the lack of control wimmin have over their lives. The power relations are embodied in obstetric technology, as I have shown, but this is just one form of the social relationship. Shelly Day comments that lack of control is integral to being a womin, and particularly to being a "mother", in male dominated society.

[D]epression as disease arises out of the dialectic between the ideology of femaleness and the practices that constitute the living reality of women; depression as a category arises out of the connections between the suffering thus engendered, and the ways in

*which the practices that constitute medicine predispose it to reify such contradictions in particular ways.*²⁴

Many of the "symptoms" of depression are closely tied to ideas of femininity, such as "emotional", "vulnerable", and "dependent". I earlier mentioned Broverman's study of the attitudes of physicians to the mental health of men and women. The study showed that they had different standards. For a woman to be mentally healthy she must accept the behavioural requirements of the female social role. "By virtue of 'normal', psychology, women are more likely to be seen as mentally ill".²⁵

The manifestations of tensions in people's lives take gender specific forms.²⁶ For example, the psychiatric symptoms of men are more likely to involve destructive hostility toward others. Female symptoms tend to be more self-deprecatory and often self-destructive. The anger and frustration women feel is more likely to be internalized. Just as "coping" involves low-profile living, so too does "not coping".

Depression is most commonly treated with drugs. Because mental illness is construed as an individual problem by the medical profession, the question doctors ask is "what is wrong with this patient?" If the drug treatment is successful in removing (suppressing) the display of symptoms, then the theory of individual causation is justified. Where the medical profession has concerned itself with the "social dimension" of female depression, the focus remains at the level of the individual, or at most, on the individual's family. The medical view of stress is associated with such beliefs as "the inability

to adjust to the feminine role" and "conflict with the motherhood role".²⁷ While these descriptions correspond to observed reality, they take "femininity" and "motherhood" as natural properties of femaleness, and they attribute illness to the failure of wimmin to accept their real selves.

Belinda: What was your husband's attitude when you were depressed?

Carol: I was 'neurotic' and other wimmin could cope, why couldn't I. I felt a failure as a mother and as a wife because I was so depressed, and he more or less thought there was no reason for it. What did I have to complain about? I had two children, a husband with a good job - I was being neurotic [Carol was given tranquillizers].

The manifestation of wimmin's resistance to their situation, to the lack of control over their lives, is reduced by the experts to a question of individual failure. The solution is found to lie in adjusting the behaviour of the individual so that she will accept the conditions of her social role. More often it is not so much a case of wimmin "adjusting" as of giving in. In the context of the female social role, submission is "adjusting".

*Sister woman sister
can you still feel any pain
or have they robbed you of your anger
while putting thorazin in your vain?*

*Sister woman sister
have the walls grown up so high
that you can't even dream of leaving
and you've forgotten how to fly.*

Holly Near

I have examined the ideology and practice of "mothering". Building on the theory developed at each stage or moment in the social process (pregnancy, conception

and birth), I now investigate the processes, specific to capitalist patriarchy which generate the social form of parenting.

4. The Separation of the Reproductive from the Productive Work Site - Immobilizing Wimmin

(1) The Power of the Male Wage

In the earlier discussion of the social relations of pregnancy, I claimed that in every patriarchal society social processes have developed which exploit wimmin's reproductive labour and use it as the basis for confining wimmin's activities in some way. The control of wimmin in certain societies is clearly visible. Their mobility and activity is curtailed by patriarchal laws which are expressed or disguised as custom or religious practice. In capitalist society however, the manner in which wimmin are controlled is not explicit but at the level of appearances depends upon their consent. By bearing children and entering exclusive relationships with men, wimmin appear to consent to the social role assigned them. But they do not agree to a position and life of powerlessness, to economic and social dependency on men. Wimmin have the vote, they enter parliament, drive tractors, and some have even flown to the moon, but wimmin do not compete on an equal footing with men for the jobs, benefits and resources in capitalist society.

One of the most important mechanisms of male power in capitalist society is the spatial separation of the reproductive from the productive work sites. Building the factories and offices in one part of town and housing

people in private dwellings in another, seems to be a natural development of "modern" society, called "progress". There is nothing natural about it. The rigid separation of reproductive and productive labour is the product of the combined forces of capitalism and patriarchal reproduction. On the basis of this physical structure, the immobilization of wimmin takes place smoothly and invisibly. They are excluded from wage labour by advanced pregnancy. If they are married or in de facto living situations they are forced to become dependent on men, because of the male wage which is based on uninterrupted service. If they are on their own they are forced to become dependent upon the state.

The wimmin I interviewed who lived with men found the reduction in their autonomy when they became dependent on their partner's wage a "shock".

Belinda: How did you feel when you went onto one wage?

Judith: That would have been the biggest thing with me I think. And that probably took quite a bit more getting used to than I imagined. Um, having been used to being independent for a long time, and also having plenty of money... He's not especially good with money you know, the bills come in and he looks at them and puts them down and forgets about them. It's always me who has to sort the money matters out. But I suppose I still sort of feel that it's his money, even though I know it's our money, what is coming in.

Judith's comment that she feels it is "his money" was made by all the wimmin, in both married and de facto situations.

Nola: Well, I was prepared for giving up work but not for the amount of difference one income would make. I didn't quite comprehend - that not having my money, X amount of dollars, was going to be quite as hard as it was. I've only just come to accept that his pay packet is ours. Up until a couple of months ago it was still his money, because I've always looked at it as his money and my money.

Dorothy found the hardest part was having to ask for money.

Dorothy: It was having to ask for the money - that's not very nice. Everyone goes through that. You haven't got any money of your own and if you can scrape a bit through your housekeeping you're good. If you can't, well it's tough luck.

Hilary felt she must be constantly on the go to "justify" her keep.

Hilary: You know, you feel less attractive so to speak. All he ever sees is someone forever racing around doing housework. Cos I used to feel for a while, not having my own wage - I had to justify my keep. And it drove him round the twist. He thought he was being reasonable and he just didn't understand it was like an insult. Anyway, we got a joint cheque account but I still find it really hard. And if there's anything I want or need I don't feel I can go and ask for it.

Being the sole wage earner, on which a woman and child/children are totally dependent for food, clothing, shelter and all other commodities gives men enormous power.

Belinda: How was your husband with money?

Carol: Mean, very mean. He wouldn't even let me bus up to my mother's because it was a dollar each way. And we didn't have a car. He had a motor bike, so it was the only outing the children and I had, but it was 'too expensive'.

Belinda: How was he with housekeeping money?

Carol: Not too bad, but he only gave me so much, like I had to ask him if I wanted two dollars to buy sanitary pads.

The final scene in Carol's marriage was over housekeeping money.

Carol: He was going up to Auckland for a week. On the Wednesday I asked him for some grocery money. I didn't have any money for food for me and the kiddies. And he threw it on the ground and, uggh. I felt like a dog - cheap. I felt like I had to grovel for it. Well, I did. I had to bend down and pick it up.

The degree of generosity or co-operation on the part of the male wage earner cannot eradicate the relationship of dependency. The power of the wage earner is enormous.

Where both male and female are bringing in a wage, since the male's is generally higher the unequal income relationship is maintained. I asked Dorothy if she was thinking of going back to full-time paid employment. At present she works part-time in a bank and cleans a neighbour's house.

Dorothy: It's just not worth it. There's no job that I know of that's well enough paid - if I could get into the rubber works or the freezing works [laughing], well, I still have to come home and do my housework and things like that.

In 1982 the female average (ordinary time) weekly wage was 75.7% of the male wage.²⁸ The greater earning capacity of the male worker puts constraints on men "choosing" to become the primary childcarer.

Belinda: How would your husband feel about staying home and doing the childcare work?
Mary: He would love it, but you see the unfortunate reality is that he can earn a lot more than I can and because we have to pay so much more on this house that would have an influence on whether I could work or not.

According to the 1981 Census, wimmin are 34.2% of the full-time labour force and 82.5% of the part-time paid labour force.²⁹ Married wimmin constitute 75.6% of the latter section of the paid work-force. In a study of female parents in paid employment in Christchurch, the most frequent reason wimmin gave for being in part-time employment was "to be home with the children after school".³⁰ For female parents, employment is largely a matter of fitting waged labour in with unwaged labour.

(2) "Fitting In" - Juggling Reproductive and
Productive Labour

The social relations of reproduction determine the conditions under which wimmin re-enter paid employment after childbearing. This applies both to full-time and part-time employment. The time at which wimmin leave their jobs because of pregnancy and childcare work is crucial: it is the stage (twenties to thirties) where promotion and career advancement is most rapid. While wimmin are engaged in reproductive work, male activity in the workforce is unimpeded. They are free to take promotion, attend course training, travel away from home to attend meetings, move home for career advancement, or even work back at nights and in the weekends. While wimmin are out of paid work, men secure an advantage. When wimmin return, if they can re-enter the same occupation, they often have to start again at the lowest level. Often both their skills and confidence atrophy.

Part-time paid workers are particularly vulnerable to exploitation, intimidation and sexual harassment. They are often as isolated on the job site as they are in the home. The type of work wimmin are employed in reflects the division of labour in the home, such as cleaning, food preparation and clerical.

Brenda: I've got a job, it's in the night, cleaning. I've been there two years this October. It works out at 28 hours a fortnight.

Belinda: Like it?

Brenda: No, not really. But I just do it, it just helps. If I have enough sleep it's not too bad. Like some weeks I'm just on the go for three days which means I don't get a sleep for a day, and then I have to get to bed really early otherwise I can't get up. When Jane's at school I'd really like to find something during the day, say from

ten til two. Not too many hours, just to help out a bit.

"Helping out" with part-time employment makes an enormous difference to subsistence living for low income families. It also "fits in" with childcare labour.

Dorothy: I like this job next door [cleaning]. That gives me ten dollars and that enables us to have - fish and chips on a Saturday night, which is a treat, and what else do I do with it? Oh, (M) might want ice-blocks for Saturday night and I might buy him a couple, and the kids a bag of lollies. But that just covers my - apart from housekeeping. I don't have any money left out of my house-keeping.

Some wimmin are able to take children with them to a job, but very few can.

Kim: I do the odd hours. Like I did two hours last night. And I've done the odd hours in a burger bar, got a girlfriend that owns a burger bar. I did some housekeeping for some friends. I used to prop him up in the pram and wheel him around into each room, and if I had to stop and feed him - I had to stop and feed him. They didn't mind whereas a lot of people probably would. And I sort of did bits and pieces - and I'm working next Wednesday for two hours, but I couldn't do it full-time.

Except for casual arrangements such as this, made between friends, there is a rigid separation between the reproductive and productive work sites. The artificial and flexible nature of this structure is demonstrated by the creation of childcare facilities on the paid work site during wartime or periods when capitalist profitability is high and full-time female workers are required in the workforce. But creches set up by capitalists rapidly disappear when profit slumps. This shows that the organization of childcare and productive labour is socially and historically contingent. An essential goal for overthrowing patriarchy is breaking down the spatial separation of the reproductive and productive work sites. One of the major

constraints on wimmin's participation in the workforce is the lack of formal childcare facilities. I briefly examine the situation of institutional childcare.

(3) "Consenting to Mothering" - The Lack of Formal Childcare

The shortage of formal childcare reinforces wimmin's inability to escape the social role of "mothering". It helps protect male privilege in the workforce as wimmin are unable to "compete" for jobs if they cannot find or afford childcare.

There is a great shortfall in the number of places available for pre-schoolers. In March 1980 there were places for full-day care for only 4,862 children, while there were female parents of an estimated 40,000 pre-schoolers in paid employment.³¹ The majority of places are for part-time care only. Very few places are available to children under two and a half years of age. This makes it difficult for wimmin to return to their jobs rapidly, if they want to.

Recent studies have shown the prevalence of informal childcare arrangements: neighbours, friends, relatives. The Christchurch study found that the most common arrangement was that the children were cared for at home by the wimmin's partner or another relative.³² Helen Cook comments, "Society assumes that the childcare problem disappears when children start school but it is often even more difficult because of the total lack of services with the consequent privatised and often haphazard arrangements that are made."³³ Finding suitable childcare arrangements

is difficult with children of all ages, and it can also be very expensive.

With the exception of free kindergartens, playcentres and special schools, formal childcare is expensive. The average fees for a child over two and a half in 1982 was around \$50.00 per week, and from \$60.00 to \$100.00 for children under this age.³⁴ The maximum capitation fee allowed to centres by the Department of Social Welfare is \$18.50 for low income parents. For women on the Domestic Purposes Benefit, the cost is prohibitive. At the same time, they are told to "get some training", "get a job" and "get off the benefit".

The wages and conditions of work in formal childcare embody the patriarchal social relations of reproduction. There is no award for the workers and therefore no provision for personal grievance disputes, sickness and domestic leave, maternity leave, redundancy or other basic rights.³⁵ Training for staff is limited and uncoordinated. The only protection childcare workers have is the Minimum Wage Act which states that no worker over the age of 20 years can receive less than \$2.14 an hour. Many childcare workers are under 20 and receive rates of pay around \$1.50.

The structure and conditions of formal childcare are an extension of the practice of "mothering". The social relations of reproduction determine the nature of the facilities on the premise and the extent which women are to be unsupported and unremunerated for the work of parenting. The social relations of production exert a lesser, but nonetheless significant, force in determining the institution of formal childcare. The motivating force is rate of profit.

Formal childcare developed on the basis of an ideological distinction between the provision of "care" and the provision of "education". Childcare centres, it is argued, provide a welfare service, while kindergartens provide an educational service. The ideology asserts that wimmin need assistance in educating children, but not in caring for them. The legislation on and funding of formal childcare expresses the view offered by the Minister of Social Welfare in 1974.

Normal family life should remain the paramount unit for childcare in the community...[W]e have not and will not devise a scheme which will encourage mothers to place their children in care unnecessarily.³⁶

Private childcare in the home and the lack of formal childcare facilities are the determining influences on the nature of female paid employment: low pay, low skill levels, high job turnover and poor working conditions. Thus there is a dialectical relationship between reproduction and production. The weak position of wimmin in the workforce and the strong privileged position of men reinforce the unequal power relationship in reproduction.

The final mechanism I examine in detail is the social isolation of wimmin. In capitalist patriarchy this primarily takes the form of the private nuclear family, although there are other forms of it as I indicated in the chapters on conception and childbirth. The process of confining wimmin is a classic way of subordinating them to male domination.

(4) Confining Wimmin - Control Through Social Isolation

The process of isolating wimmin appears to happen

quite "naturally". People have children, marry and settle.

Belinda: How long have you been living here?

Anita: About a year.

Belinda: Do you have much to do with your neighbours?

Anita: These people over here [indicating] are really good. They're about the only ones I know. Most of the people here are a lot older, or work during the day. Through the week I seem to be really busy with one thing and another. I don't spend much time at home, like most mornings I'm not here. I just hate weekends, so boring. You know, everyone else seems to be out and about, going somewhere. I just hate them.

When wimmin are at home with young children, the physical and social isolation from other people, particularly adults, is mediated by access to transport, for example, having enough money to own and or run a car. But few wimmin parenting alone can afford a car.

Belinda: Do you have a car?

Carol: No. I did have a car, or I've got a car but I can't afford to run it, to keep the maintenance up, you know, tyres and things.

Belinda: How long since you've been able to afford to run it?

Carol: About a year. I had to pay registration on the car, about \$80.00 and I didn't have the money. It's sitting at my sister's at the moment. A friend of mine's boyfriend is a mechanic and he's offered to fix it up but it's just the money.

Belinda: How do you find it without a car?

Carol: Awful, terrible, horrible - I hate it. You're really trapped, like groceries. I have to carry them home. In the middle of winter, if the kiddies are sick we have to walk them round to the doctors. We can't afford a housecall.

You can't take the kiddies anywhere, you can bus, on a Saturday, but Sunday is just impossible to go anywhere. So they miss out. You can't put them in any clubs after school because you've got no way of picking them up, or dropping them off. I can't go out at night to any hobbies. Well, I could, but I won't. I'm scared I'll get raped or knifed or robbed. So it's really bad.

For wimmin working in the private home with small children a car is the means of mobility. It affords access to people and places, and a degree of real independence.

Because of the importance of mobility, some men use their power to control it as a form of punishment or simply as a means of keeping a check on wimmin's activities. Dorothy's husband used to go out and record the mileage when she returned and demanded an account of why she "needed" to use the car. When he wanted to punish her, Carol's husband, understanding the importance of adult company and the pressure of isolation, would refuse to talk to her at nights. The only transport "they" had, was his motorbike.

Carol: I had pre-schoolers and sometimes they were the only ones I had contact with all day, and as a sort of weapon, he'd come home and he wouldn't speak to me because he knew it drove me batty, because I didn't have any adult conversation.

Carol was powerless, having neither the transport or money to get out during the day. Her husband had social contact during the day, the power of the wage, and transport. The exercise of power does not have to be explicit, as it is in this situation. Even where there is no attempt directly to limit wimmin's mobility, the isolation and the unequal relationship remains.

All of the wimmin I interviewed commented on the importance of a car with young children.

Brenda: We didn't have a car for about a month and it was awful, it was horrible. I felt I didn't want to live way out here [a suburb on the outskirts of Christchurch]. To go anywhere it was on the bus, and I had both the kids at home - oh it was awful. I just don't think I could do without a car. I just wouldn't go to town, unless I could leave the kids somewhere.

Brenda's only regular help in childminding is her mother-in-law, who lives on the other side of town, two bus trips away.

Gay: Last year, at home with the kids, and (M) wasn't here and there were no adults, it was horrible, it's lonely. You've got these two kids, you've got to entertain them most of the time, or they need things all the time, and you've got to provide them. There's no relief, unless they're sleeping. I had transport so I used to get out and visit friends. Luckily I had two or three friends with kids a similar age. Sometimes wimmin get together with their neighbours, I didn't really have that where I was and I didn't really seek it because I had other friends and I had transport so I could get out.

For low income wimmin, mobility is just part of the problem. They may be able to get out to social occasions, but find they have problems relaxing.

Belinda: How do you find getting babysitters?

Anita: Oh it's really hard.

Belinda: How's your social life?

Anita: Aaah - Zilch! I used to have a girl across the road but she charged \$1.75 an hour and that was alright except I used to sit there and think: 'Oh what's the time? I owe her so much'.

Having access to a car, however, and being able to afford running costs does not necessarily mean that a woman with small children will be able to make use of it. Particularly when children are young, the ordeal of coping with the organization required to transport children and the necessary 'equipment' can prove too great a disincentive.

Belinda: Did you have transport?

Fiona: Yeah, yeah, but it got to the stage where I couldn't be bothered going out half the time because of the effort it took to get them organized, get them in the car to take them over to mum's or to go shopping.

The spatial separation of the reproductive and productive work sites means that the physical distance between private homes and childcare centres, schools, shopping areas and other facilities militates against wimmin being able to take full advantage of "public amenities".

Fiona: See, by the time I got Tim to kindy at a quarter to nine and him over there at nine oclock, then picked him up at half past eleven, and picked Tim up at half past eleven and Jo up at quarter to twelve and come home, I might be able to get the beds made or something, and that'd be about it - it didn't quite work out.

Carol did not want to send her pre-schoolers to kindergarten, saying that it was probably because she was "lazy". Without transport, Carol would have spent her entire morning organizing them to go, walking them there, walking back and then having to return almost immediately to pick them up. For wimmin who do want to use formal childcare facilities, there are structural constraints weighing heavily against them: shortage of places, cost, transport and distance.

There is another feature of the physical structure of capitalist patriarchy that reinforces the social isolation in which wimmin, as reproductive workers, live. Getting out of the house is one thing, navigating around town with children, prams, strollers, and shopping in tow is another.

Town planning embodies the structural separation of social production from social reproduction. At the level of appearances, the design is "anti-child". The facilities for small children are poor and children are often treated as nuisances in "public" places. But the design is not "anti-child", the people who really suffer are the childcarers, wimmin.

The Plunket nursing supervisor for the Auckland central district comments: "It really is a case for many mothers of 'negotiating the hazards' when they go out with young children".³⁷ The design of public buildings and transport reflects the power relationship of reproduction, as well as

the social relations of production. This only becomes apparent to people working in childcare. There are insufficient facilities for wimmin to breastfeed babies and to change nappies. There are often heavy doors into banks, libraries and shops or revolving doors which do not admit prams and pushchairs. Men have been able to "act like gentlemen" and open doors for wimmin often because they have the privilege of empty arms. Steps up to buildings are another barrier to movement. Supermarkets are traps for childcarers: the bars designed to prevent customers removing shopping trolleys and goods are an obstacle to customers wielding pushchairs. And the layout of consumer goods is designed in such a way that the shopping trip is destined to end with a struggle over the displays of sweets, located within the grasp of small children.

The public transport system exercises control over wimmin's mobility. Wimmin with children are forced off the streets during certain hours when the traffic in "real" workers is at its peak. Constraints like these contribute to the set of forces encouraging wimmin to "consent", to submit to the private, isolated conditions of childcare labour. But wimmin are not only marginalised in "public" places. Since social parenting is not a practice in patriarchal society, few homes where people do not have children themselves are able to provide amusement for small children. Children become bored and frustrated inside "adult-only" homes and childcarers become embarrassed and uncomfortable. During the years of early childcare many forces compel wimmin to "consent" to social exclusion and isolation.

5. Summary

The social relations of childcare are determined by the power relationship established, at the most fundamental level, during pregnancy. But it is at the stage of childcare, a stage spanning years, where wimmin experience the real effects of male power, materially, socially and politically. I have attempted to distinguish the social process of childcare, from the work process. I have argued that the socially necessary work of childcare has no implication for the social organization of that work and I have examined the form taken by that labour in capitalist patriarchal society.

The mechanisms of male social power are not visible in capitalist patriarchy, as they are in some societies. Wimmin appear to consent to the social role of "mothering". The ideological justification involves two major beliefs: that the genetic makeup of wimmin predisposes them toward "maternal caring" and that children need the constant physical presence of the female parent.

One of the most important male institutions that enforces the female social role and attempts to neutralize dissent is the medical profession. Particularly in their capacity as mental health experts, male medical professionals wield enormous power over wimmin. The effects of the oppressive conditions in which wimmin are forced to work as childcarers are socially transformed by the experts, into "individual" problems. The ideological belief that childcarers are failures if they resist or struggle against the role required of them by patriarchy, is constantly reinforced by the medical profession.

The spatial separation of the reproductive and productive work sites is an invisible mechanism of the social relations of capitalist patriarchy. Wimmin are confined to the home on the basis of advanced pregnancy, leaving men free to pursue their interests in paid employment. During the period of confinement, wimmin are compelled to assume the role of primary childcarer and the work patterns established carry over to the stage when they re-enter paid work. The basis of the male wage is uninterrupted service. It is a source of enormous power as wimmin become dependent on the male productive worker, economically, socially and politically. By the time wimmin return to paid work, the ground they have lost in terms of promotion and training is irretrievable.

Throughout the social process of reproduction, one of the most important mechanisms of male power is the ability to separate wimmin. In capitalist patriarchal society, this primarily takes the form of the private, nuclear family. With the rise of male power, communal bonds among wimmin were destroyed, thus enabling men to take control of their lives. In consequence, wimmin are dependent upon men, isolated from each other and politically weak.

In the concluding chapter I consider the analysis of childcare in light of the theoretical propositions developed over the total social process of patriarchal reproduction.

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CHAPTER SIX

CONCLUSION

The concrete relationships between wimmin and men are difficult to view politically since they are so much a part of our everyday routine and social exchanges. We can observe the inequalities in our lives and we can measure these quantitatively: income, education, skill, leisure time, mental health, and so on. But one cannot discover the causes of the social relationship by a method which just quantifies the effects. Without a theory of how wimmin and men come to occupy such unequal position of power in society, we are left to conclude that the differences are innate, or that wimmin subscribe to a different value system that allows them to be exploited under a "masculinist" regime. The most pressing task for feminist materialism is to discover and draw out the real infrastructure of patriarchal reproduction. One must distinguish it from the material infrastructure of production and show the processes through which the social relations operate.

In keeping with the materialist proposition that the production and reproduction of life entails real relations among people, I have attempted to isolate the mechanisms of male social power which are institutionalized in our lives in the system of capitalist patriarchy. The only way I could attempt to separate the social forms from the essential relations was by using a realist scientific methodology. Dialectical materialism is a realist science and the marxist

method of abstraction allows us analytically to separate the concrete level of appearances from the hidden level of reality.

I have taken the insights of feminist materialism and attempted to apply them to concrete situations. I interviewed wimmin who are involved in childcare labour and I have tried to understand their reality in light of these insights. The experiences and knowledge shared by these wimmin transformed and enriched the theoretical propositions with which I began.

Using the marxist method of abstraction I have hypothesized the determining order of significance of the mechanisms responsible for the social forms that shape and dominate female existence. There are three primary social forces that contribute to the social totality of capitalist patriarchy in Aotearoa: patriarchy, capital and white domination. Because of the enormity of the task, I have been unable to investigate two of these forces. However, I believe that the fundamental mechanisms of patriarchy have been accounted for.

Although the method of abstraction is difficult to apply and often bewildering to follow, it is essential that each moment in the social process of patriarchal reproduction should be viewed in isolation. This procedure does not contradict the fact that wimmin never experience the effects of patriarchy in isolation, but always as the outcome of a combination of many forces.

A moment or an event in a womin's life cannot be understood outside of the relations of power which shape it. Because the forces which determine the event are

complex, there is no question of contemplating a mono-causal explanation. For example, the situation in which Judith did not "decide" to conceive but fall pregnant embodies the social relations of capital as well as patriarchy.

Judith: As you're approaching 30, you're just starting to get real success in your job, if you've got a career, and then suddenly you've got to think, well, what am I going to do? I think that sort of happened to me. I was getting job satisfaction. I was going well in my job. I was getting good money, and then I sort of had to think - well look, 30 is looming up - make a decision pretty soon. You know, a definite decision. It's one of those things that's sometime - never. I think perhaps it's easier to just fall pregnant than to choose to go off the pill or whatever, make a conscious decision about it.

A consciously planned pregnancy would not have immunized Judith from the political implications of child-bearing: the adverse effect on her position in paid labour and the unequal division of childcare labour. The decision to "fall" pregnant rather than to plan to conceive is the product of forces generated by both patriarchy and capitalism.

Patriarchy, capitalism and white domination do not exist in separate spheres in people's lives, but in combinations. For this reason, to discover the mechanisms responsible for patriarchy, each moment in the social process of human reproduction must be abstracted from the others, so that the interconnections among the many social forces which impinge upon us can be grasped. We must have a method capable of detecting the ways in which the social structures are locked together (by first taking them apart), so that the political strategies we devise are based on an understanding of real underlying causes.

One of the tensions involved in this theory is

dispelling the ideology of biologism while simultaneously claiming the significance of humin reproduction in a determinative social context. The tension exists, not because the two theories are in any way related (in fact they are in total opposition), but because of the danger of not making the distinction sufficiently clear.

At each moment in the social process I have explained just some of the ways in which the ideology of naturalism reduces the social form of the reproductive work process to a necessary function of nature. It is essential to understand that no activity in which humins engage is pre-determined by "brute instinct". What marks us off from other species is our ability collectively to transcend nature, to respond intelligently and to adapt the environment to our requirements. Activity and sociability are the essence of humin existence.

I have consistently argued that the work processes of humin reproduction are subordinated to the social process. In patriarchal society the power relations between wimmin and men dominate the concrete experience of childbearing and childrearing. But it is not enough to know that lack of control over one's life is integral to female existence in this society, we must know how men establish and maintain that control. Through isolating each moment in the social process of reproduction and investigating its forms of control, the male social role becomes increasingly distinct. We move slowly from Friedon's "problem with no name" to an understanding capable of "naming" many aspects of the social whole, and we can see more clearly the interconnections. For example, the role of the "expert" takes many different

forms at each moment in the social process.

Men monopolize "expertise" in every major social structure. They dominate and control physical health, mental health, childbirth, fertility and childcare as well as the organization of political economy. By invoking the past we learn that men have not always been in possession of society's knowledge, skills and technology. We can see that the process by which they appropriated these resources was simultaneously the process by which women were divested of control.

One of the mechanisms which I have argued assumes different forms throughout the social process is the separation of women from one another. When particular moments are examined, the effect of this process becomes clear, but the links with other moments are not always apparent. For example, in the hospital environment, women are physically isolated and separated from support. Submission is induced by the experts who can take control of childbirth and displace the woman as active agent. They create a situation in which she is socially vulnerable and therefore unable to fight for control.

When women leave hospital they enter the private nuclear family where the process of separation continues. The resulting isolation is a vital component of male control. It was essential that patriarchy should destroy the communal bonds among women in order to establish domination. Physically confining them is an effective way of doing so, particularly when the process seems quite natural. Men and women living together, having children, buying a house, are all experienced as quite natural events

in people's lives. However, although they fulfil real needs, there is nothing "natural" about the way in which these needs are met.

I explained how the foraging Zhū/Twasi wimmin enjoyed a degree of autonomy unknown in present day society. The wimmin had strong communal bonds, they were able to move about and congregate together freely, to support one another and to share knowledge and resources. The social visibility and freedom of movement was a source of strength and the social relations between wimmin and men were more or less interdependent, not oppressive. But in capitalist patriarchy, social relations are not interdependent: wimmin are economically dependent on men, either on individual men or on the patriarchal state. The real relations are female political weakness and male political power.

I have argued that the unequal power relationship is first of all established at the stage of pregnancy. But the actual work of childbearing has no implications for the social organization of reproduction. Rather, only in the context of certain material conditions can men subordinate wimmin on the basis of that work. The constraints placed on wimmin by advanced pregnancy are not in themselves significant. In fact, they are only marginal. However, to that marginal extent, men are able to gain the "upper hand", if they can get away with exploiting childbearing as a means of establishing dominance.

The existence of a distinct male interest and capacity to pursue this interest, emerges only with the development of a significant social surplus. The form that this takes is irrelevant, it can be grain, cattle, metal

or commodities. In societies where the survival of the group depends upon the full participation of each member in essential work and interdependent social relations are necessary for this, the conditions for political domination of one group by another do not exist. Childbearing is not a social, economic or political liability, and childcare is not exclusively associated with wimmin. However, with the development of a significant surplus of goods the potential arises for the appropriation of that surplus by a group with a common and distinct political interest.

Historically males have pursued their political interest and asserted control over wimmin by exploiting female involvement in the activity of childbearing. The site of confinement has come to be associated exclusively with reproductive work. While wimmin have been involved in the activity of pregnancy men have been free to go off and organize the productive, surplus yielding labour process, and they have done so in their own interests.

There is enormous variation in the social form these processes have taken, but the fundamental mechanisms remain constant. The essence of patriarchal society is male privilege, and everywhere wimmin have been subordinated on the basis of their reproductive labour. Once the exclusive association of wimmin with childcare labour has been established and they have been physically confined on the basis of childbearing, the communal, strengthening bonds among wimmin are destroyed and they are left isolated and dependent. The use of force against them only becomes systemic once men have appropriated economic and political power.

Violence is never the basic cause of any system of

domination and there are always many ways of maintaining submission to what is basic. While the use or threatened use of force against wimmin is systemic in capitalist patriarchal society, the power relationship is maintained more by invisible mechanisms than by physical coercion. One of the characteristics of capitalist patriarchy is that submission is socially transformed into "consent". Wimmin "consent" to marriage, childbearing and childcare at the level of appearances, but they do not consent to the hidden mechanisms that result in their social powerlessness.

One of the processes by which wimmin are drawn into the social role of "mothering" is their lack of control over fertility. The male appropriation and control of fertility is socially concealed by the form of health "care", which is a product both of patriarchal and capitalist social forces. Because of inefficient and often harmful contraceptives, many wimmin "fall in" to the reproductive process, epitomizing wimmin's lack of control over their lives. The constant vulnerability to conception for heterosexual wimmin ties sexuality tightly to procreation. Yet the ability to decide when to conceive does not fundamentally affect the outcome of the process, as the social relations that determine the division of childcare labour are not established at the moment of conception. However, the struggle to control fertility is an essential part of wimmin's self-determination.

In capitalist patriarchy, one of the most important mechanisms responsible for the subordination of wimmin to the social role of "mother" is the spatial separation of the reproductive from the productive work site. In the

dialectical relationship between the two, male privilege in the wage system reinforces wimmin's powerlessness in the home. The organization of the paid workforce embodies the social relations of reproduction, because the male wage is based on uninterrupted service. By the time wimmin return to paid labour, having been confined to the home on the basis of advanced pregnancy their male counterparts have firmly secured a position of dominance. Few wimmin are able to recover the ground they have lost in terms of promotion and training. The lowly position wimmin occupy in the wage system consolidates the division of childcare labour established during the period of confinement.

While parenting is the socially necessary work of caring for children, under capitalist patriarchy the work process is subordinated to the social process of "mothering". And while the social relations responsible for "mothering" are fundamentally established at the moment of pregnancy rather than childcare, it is the latter stage at which wimmin experience the real effects of economic and political powerlessness.

I claimed that under certain conditions it is possible for wimmin to prevent men from gaining the "upper hand". Although we cannot predict the social forms and organization that will result from the overthrow of male privilege, we do understand some of the revolutionary social changes that are essential. The development of female political strength depends upon reestablishing communal bonds among wimmin, and in particular, taking back control of fertility and childbearing. These struggles are essential for liberating female sexuality from procreation, and are

not only for the benefit of heterosexual wimmin. The patriarchal control of sexuality affects all wimmin.

Male privilege rests heavily on the separation of reproductive from productive labour. But as socially necessary work processes they must be somehow combined. I do not know how, but men are going to have to be compelled to become childcarers. "Mothering" must be replaced by social parenting in which the responsibility and work is not dumped on female parents, biological parents or on any distinct class of labourers, but is shared communally in ways we can only begin to imagine.

One thing is clear, male privilege will not be eliminated by the wimmin's movement, or by the overthrow of capitalism, or by the return of Aotearoa to the tangata whenua. The structures of race, gender and class are interconnected and the implication for radical change is clear. The political struggles must be linked.

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